

# BOY SCOUT TROOP 1184

## Check/Reimbursement Request Form

(Attach all supporting documentation/receipts)

Requested by : \_\_\_\_\_ Date: \_\_\_\_\_  
(signature)

Date needed: \_\_\_\_\_

### Please prepare check or reimburse as follows:

Check payable to: \_\_\_\_\_ Amount: \$ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Or Apply reimbursement to Scout account: \_\_\_\_\_  
(Scout name)

Explanation of payment/reimbursement (include event date when applicable): \_\_\_\_\_  
\_\_\_\_\_

Special instructions: \_\_\_\_\_  
\_\_\_\_\_  
.....

### TO BE COMPLETED BY TREASURER

Receipt #	Date	Vendor	Expense Account	Amount
1				
Explanation:				
2				
Explanation:				
3				
Explanation:				
Total:				

Date Paid: \_\_\_\_\_ Check #: \_\_\_\_\_ Approval: \_\_\_\_\_