



2023 ASALH FUND REQUEST or REQUEST FOR REIMBURSEMENT

To: Current Treasurer and Current Financial Secretary

Date: _____,

Name of Requestor: _____

Purpose: _____

(Attach all receipts, invoices, etc. to this request)

Total Requested: _____

Approved: _____ Date: _____

Signature of President: _____

Payable to: _____ Address: _____

Date Treasurer or Financial Secretary received the request *(please initial)*:

_____ Date Check issued: _____

Check Number: _____ Check amount: _____

Signature of Treasurer issuing the Check:

Method of Delivery of Check for payment by Treasurer or Financial Secretary :

_____ (Please initial)

Signature of Member making the Request indicating that payment has been received:

_____ Date: _____

Please return the completed form to the Treasurer