

**BISHOP RUOCCO COUNCIL 9275
VOUCHER REQUEST FORM**

<i>This section completed by Financial Secretary</i>		
Voucher Date: _____	Budget Item? _____	Business or Charity _____
<i>This section completed by person submitting report (include receipts)</i>		
<i>CHECK REQUEST</i>		
Submitted By _____		Check Payable To _____
_____	_____	_____
Total Expense	Expense Date	Event and/or Purpose or Description of the Expense
<i>Officer Approvals</i>		
Financial Secretary: _____	_____	_____
	Date	<i>If acting FS, please print name</i>
Grand Knight: _____	_____	_____
	Date	<i>If acting GK, please print name</i>
Trustee Approvals (minimum two)		
3-Year Trustee: _____	_____	_____
	Date	<i>If acting Trustee, please print name</i>
2-Year Trustee: _____	_____	_____
	Date	<i>If acting Trustee, please print name</i>
1-Year Trustee: _____	_____	_____
	Date	<i>If acting Trustee, please print name</i>
<i>This section completed by Treasurer</i>		
Worthy Treasurer, please prepare a check as indicated and enter the check number and check date below.		
	_____	_____
	Check Number	Check Date
Treasurer _____		voucher # _____

	Date:	
<i>Comments/Instructions</i>		