

**ORADELL GIRL SCOUTS
CHECK REQUEST & REIMBURSEMENT FORM**

Please complete this form and submit to an Oradell Service Unit Manager (SUM) along with all cash/checks collected from participants (if applicable) and receipts for expenses to be reimbursed.

(contact oradellgirlscouts07649@gmail.com for assistance)

Event/Reason for expense: _____

Name to whom check will be made payable: _____

Leader Requesting Check: _____ Troop # _____
(if different from above)

Phone: _____ email: _____

Per Council policy, all money collected from an event is to be deposited into the Service Unit account and expenses incurred will be reimbursed back to you in the form of a check from the Service Unit account.

Deposits:

Please include a list of checks submitted for deposit listing name, check number, and check amount.

Cash amount collected from participants: \$ _____

Total amount of checks collected from participants: \$ _____

Total Deposit Amount: \$ _____

Receipts:

Store: _____ Date: _____ Amount: \$ _____

Store: _____ Date: _____ Amount: \$ _____

Store: _____ Date: _____ Amount: \$ _____

Reimbursement Total: \$ _____

Signature of Person Requesting Check: _____

___ I will pick up the check. Please text or email me when ready at _____

___ Please mail check to _____

Use this space for any notes or comments: _____

APPROVAL *****

Date: _____

SUM: _____

Treasurer: _____

Check#: _____ Amount: _____

Payee: _____