

Santa Ana Educators' Association • 2107 N Broadway, Suite 305 • Santa Ana, CA 92706

Expense Reimbursement - Check Request

Members will be reimbursed for expenses incurred on behalf of SAEA by submitting this form, with the top portion completed, Please attach, as appropriate, any supporting receipts and a member expense form. Submit to the Treasurer who will review the request and, if approved, complete the bottom portion of this form and initiate a check request. Once the check has been issued and signed, the check will be mailed to the address provided or the requesting member may pick-up the check after signing for its receipt.

Completed by Member

Requested by:		Date:
Payable to:		
Mailing address:		
Amount:		
Purpose:		
Don	t forget to attach receipts & member expense report, as approp	priate
Completed by Treasure	r	-
Board Approval:		Date:
Treasurer approval:		Date:
President approval:		Date:
Budget Line Number:		
Check #:		Amount:
Check received by:		Date:
Mail by:		Date:
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