

**American Library Association, New Members' Round Table (NMRT)
Check Request Form (FY2006-2007)**

Instructions:

1. This form must be completed and submitted by August 1 for expenses incurred during the fiscal year.
2. Fill out this form completely. All questions must be answered. Please print clearly.
3. Contact the NMRT Treasurer (ccnmrt@yahoo.com) for the correct account number.
4. If you have any questions about completing this form, please contact the NMRT Treasurer.
5. Make two (2) photocopies of both the completed form and any receipts, quotes, or other supporting documents.
6. Mail and file as indicated:

Mail original form and original docs to: Kim Sanders Communications & Marketing American Library Association 50 E. Huron St. Chicago, IL 60611-2729	Mail 1 photocopy of form and docs to: Catherine Collins NMRT Treasurer 6635 McCallum St., Apt. B-807 Philadelphia, PA 19119	Keep 1 photocopy of form and documents for your records.
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Information about the person (You) completing this form (Requestor):

Requestor Name _____

- Are you a:
- Board Member
- Committee Chair
- Committee Member

Committee or Office Name _____

Supervising Officer Name _____

Justification/Description of Payment:

Requestor Signature _____

Date _____

Information about the payment and the person or company receiving check (Payee):

Is this check request for a(n): Advance Reimbursement

Payee Social Security Number (required when payment is made to a person) _____

Payee Name _____

Payee Mailing Address:

Street Address _____

City, State, ZIP Code, Country _____

Payee Home Address (required when payment is made to a person):

Street Address _____

City, State, ZIP Code, Country _____

— 607 —

Account Number (You must contact the NMRT Treasurer for this.)

\$ _____

Check Amount