

REQUEST FOR REIMBURSEMENT

Before making any payments on behalf of Uh-To-Yeh-Hut-Tee Lodge, you must get approval of either the current Lodge Treasurer Adviser or the current Lodge Adviser. You do not need prior approval for expenditures if it is within the budget approved by the Lodge Executive Committee (LEC) for the event or committee.

<u>After making payments</u> on behalf of Uh-To-Yeh-Hut-Tee Lodge, submit your receipts along with a completed Greater Tampa Bay Area Council Check Requisition Form to <u>BOTH</u> the Lodge Treasurer Adviser and the Lodge Treasurer. The form and receipts can be sent via email. A copy of this form is located on the Uh-To-Yeh-Hut-Tee Lodge website under "Downloads".

The Lodge Treasurer Adviser will approve the request and forward it along with the receipts to the Lodge staff Adviser, who will in turn process the check request for further approval and payment. This process can take up to a week and checks are only cut on the 15th and last day of each month.

The Lodge Treasurer needs this information in order to prepare his monthly report of the lodge's funds in our trust account with Council.

Any questions should be directed to either the Lodge Treasurer or his adviser.



Greater Tampa Bay Area Council Check Requisition Form

Payable to: Address:			
Amount:	\$	_	
District:	Order of the Arrow	Cost/Event Center: Order of the Arrow	
Charge to (program, youth recognition, etc.) Order of the Arrow			
Special Instr	ructions (specify ourpose)		
Date Requested:		Date Needed:	
Requested B	y:		
	oroval		
SE/DFS/CFC	Approval		

Note:

- 1. Requests must be accompanied by original invoices or receipts if applicable. Attach any support documents available (actual related requests must include a copy of the activity budget).
- 2. Place all documents face up with amount circled and <u>stapled behind</u> request form.
- 3. Requests for checks must be approved before being summited to accounting.
- 4. Checks are distributed on the 15th and last day of the month.
- 5. ALLOW TWO Weeks from date of request turn-in for check to be processed.

DO NOT WRITE BELOW THIS SPACE		
PO #	Date Inv.	
Check #	Date Paid	
Invoice #	Vendor #	
Account #	Amount	

Revised 5/15/2009

