

**Check Request Form**  
 Class Reps/General

**Note: Each "Payee" must have a Check Request Form Completed. Submit completed form and receipts to the GNL office, [gnoffice@gnlwebsite.org](mailto:gnoffice@gnlwebsite.org) for approval. The Payee will receive a check in the mail within 3 to 5 days after approval.**

<b>Payee Name:</b>	
<b>c/o if applicable:</b>	
<b>Address for Payment:</b>	Street:
	City: <span style="float: right;">State: <span style="float: right;">Zip:</span></span>

Date	Description	Total

I have attached all original invoices or receipts and attest that all expenses are related to expressed purposes.

I have reviewed the attached original invoices or receipts and attest that all expenses are related to expressed purposes.

	Approved by: _____ Date: _____
Ledger ID: See line items	