



Stockton, California

Request for Financial Disbursement

Date requested: _____

Requested by: _____

Amount*: \$ _____

Actual date of expense/purchase: _____

Description of expense/purchase: _____

Make check payable to: _____

Signature of person requesting disbursement: _____

** Attach receipt if available. If a receipt is not available, explain why not. If receipt becomes available at a later date, forward to Treasurer ASAP.*

.....
Approved by (President): _____

or

Approved by (Treasurer): _____

.....

Paid by check #: _____ Dated: _____