



Special Libraries Association  
San Andreas Chapter  
Expenditure Request

Request Date: \_\_\_\_\_ Requester: \_\_\_\_\_

Please issue a check for the following:

Amount: \$ \_\_\_\_\_

Payable to: \_\_\_\_\_

Mail to: (include name only if different from Payable) PLEASE PRINT

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Description of Expenditure:

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Committee/Office: \_\_\_\_\_

Submit to:

Helen Losch  
1044 Madison Ave.  
Redwood City, CA 94061  
losch\_helen@gsb.stanford.edu

Please attach all original receipt(s) or invoice(s)

Treasure's use only:

Check # \_\_\_\_\_

Budgeted ( ) Yes ( ) No

Date Paid \_\_\_\_\_

Board approval date: \_\_\_\_\_