

Quebec 2020 Vendor / Reimbursement Cheque Request Form



Committee Event	
Authorized by	
	(Event Champion)
Requested by	
Payable to	
Mailing Address	
Email	
Telephone #	

- * If a cheque is required for date of event, advise supplier that an invoice is required in order to release the cheque
- * No invoice, no cheque
- * Itemize invoices below and attach to form

Date	Description	Amount
Total Cheque Amount		

Cheque Issue Date:	Cheque #
Signature	

**Please attach scanned invoice
Original invoice will be required to receive cheque**