

Expense Requisition Form

Southwest Suburban Federation of Teachers AFT Local 943 15521 S. 70th Court Phone 708.633.0943 Fax 708.633.0944

ORWILLED BA:		
Name:		
Title:		
AYABLE TO:		
Name:		
IAIL TO:		
Name:		
Address:		
City, State, Zip:		
Phone Number:		
VENT OR PURPO	OSE OF REQUEST:	
VENT ON TON	JOE OF REQUEST.	
COMMENTS OR S	PECIAL INSTRUCTIONS:	
DATE	DESCRIPTION	TOTAL
	Return this sheet along with ALL receipts to: Alfreida Jamison, Treasurer,	
	AFT Local 943, 15521 S. 70 th Court, Orland Park, Illinois 60462 (revised 2/2021)	
OR OFFICE USE	ONLY – AUTHORIZED BY:	