CRA PAYMENT REQUEST

To: CRA Assistant Treasurer OPEN BOX Date _____

From: _____ Apt. # _____

Committee: _____

Make check payable to: _____

Address: _____

If payable to a Resident, Apt # _____

Date of Expense	Item and Explanation	Amount
	Total payment requested	$ 0.00

Please attach all receipts or invoices supporting these expense items.
Include explanations where appropriate.
Name only one payee per request.
Please allow seven days for payment.

Signature: _____

Approved by: _____ (Committee Chair or designee)

_____

For Assistant Treasurer's use:
Date received:
OK for payment:
Account:

For Treasurer's use:
Date paid:
Check no.:

Print Clear Form

revised 7/3/2017 (04)