



Please DO NOT staple anything on top of this page.
All evidence must be stapled on the back.

350 Victoria Street | POD-360B Toronto, ON, M5B 2K3

FOR RLAS OFFICE USE ONLY

CHEQUE NO:	LINE ITEM:
CHEQUE AMOUNT:	CHEQUE DATE:

CHEQUE REQUISITION FORM

Date: _____ Student Group: _____
Amount Requested: \$ _____ Event: _____
Payable to: _____ Email: _____

DESCRIPTION (of the purchase and its use)	Actual Vendors Used	Approved <i>RLAS</i> <i>BUDGET</i> Line Item	Amount

TOTAL: \$ _____

Please attach all receipts to the BACK OF THIS PAGE. You will be notified when your cheque is ready.

Approved By: _____ (RLAS)
_____ (Student Group)
_____ (Student Group)