



Hostelling International-USA-Michigan Council
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Check Request

- All reimbursements ***MUST*** have a receipt
- Expenses must have approval of the Council Treasurer or have been budgeted

PLEASE ALLOW 14 BUSINESS DAYS FOR YOUR CHECK

Person making the request: _____

Telephone number: _____ Email Address: _____

Check is to be made out to: _____ Total Amount: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Description of the program/trip/event for which reimbursement is requested:

Office use only:
