

VSLA  
Request for Check

Please include a receipt with this request and submit to:

Donna Smyth, VSLA treasurer  
4 Homer Ave.  
Queensbury, NY 12804

Date: \_\_\_\_\_

Check Amount: \_\_\_\_\_

Payable To: \_\_\_\_\_

Mailing Address: Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

For: \_\_\_\_\_



Account Charged: (Choose from the list below)

\_\_\_\_\_ Membership

\_\_\_\_\_ VSLA Newsletter

\_\_\_\_\_ VSLA Award

\_\_\_\_\_ Board Meetings

\_\_\_\_\_ Conference-Fall

\_\_\_\_\_ Conference-Spring

\_\_\_\_\_ Brochures

\_\_\_\_\_ Delegates

\_\_\_\_\_ President Dues

\_\_\_\_\_ Postage

\_\_\_\_\_ Telephone

\_\_\_\_\_ Legislative Day

\_\_\_\_\_ Website

\_\_\_\_\_ President Conference

\_\_\_\_\_ Officers' Stipend

\_\_\_\_\_ Misc. Expense

\_\_\_\_\_ NEEMA Membership



*Treasurer's Use Only*

Check # \_\_\_\_\_

Date Paid \_\_\_\_\_