



## ALMA MATER SOCIETY MEMORANDUM

Name of the Organization \_\_\_\_\_  
Main Account Code \_\_\_\_\_ Treasurer Name \_\_\_\_\_  
Date (MM/DD/YYYY) : \_\_\_\_\_ Contact Email \_\_\_\_\_

Reason for Reimbursement through memorandum (Amount, Payee's name and Reason for Reimbursement):

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Reimbursement for: Treasurer  Other Club Member

**\*Note: Please be aware that the payee cannot sign for themselves.**

1. If reimbursement is for treasurer all three signatures must be from other executives.
2. If reimbursement is for an executive, all three signatures must also be from other executives.

I certify that the above information is correct.

1. \_\_\_\_\_ (Full Name) Position: \_\_\_\_\_

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

2. \_\_\_\_\_ (Full Name) Position: \_\_\_\_\_

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

3. \_\_\_\_\_ (Full Name) Position: \_\_\_\_\_

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