# Logo, company name  Description automatically generatedAALS Section Award Reimbursement Form

Please fill out the following form to request reimbursement for Section Awards no later than **February 18, 2022**. **\*Note:** *AALS is not issuing checks during the pandemic while we work remotely. For AALS to issue any payment we require* ***all*** *the following information.* Once completed, please email the form and receipts to sections@aals.org.

|  |  |
| --- | --- |
| **Section Name** |  |
| **Section Award** |  |
|  |
| **Date** |  |
| **Payee** |  |
| **Street Address** |  |
| **City/State/Zip** |  |
| **Phone #** |  |  |  |
|  |  |
| **Dollar Amount** | Subaccount | Dollar Amt | Purpose/GL Account # |
|  | [Internal Use] |  | [Internal Use] |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | **TOTAL** |  |  |
| **Banking Instructions** |  |  |
| **Bank Name** | **Bank routing #** | **Account #** | **Recipient email:** |
|  |  |  |  |

*\*Please be sure to attach receipts.*