



Fiscal Client Expenditure Request

Requests can be submitted with the online version of this form at www.parksandtrails.org.

Fiscal Client Name	
Date of Request	

Authorizations

Two designated contacts from the fiscal client’s leadership team must approve all expenditure requests. This is usually the president and treasurer. A third authorizer is needed if the person filling out this form is requesting a reimbursement for themselves or your group’s approval process requires it. Authorization can be a signature below or an approval sent via email.

	Authorizer 1 <i>Who is filling out this form?</i>	Authorizer 2 <i>Who else will authorize?</i>	Authorizer 3 <i>If needed. See above.</i>
Name			
Role			
Signature			
Approval	Email approval? <input type="checkbox"/>	Email approval? <input type="checkbox"/>	Email approval? <input type="checkbox"/>

Expenditure Details *(*Required fields)*

Fill in the details about the expenditure below. An attachment verifying the request, such as a receipt or invoice, is required. Please allow 10 business days for processing payment.

Amount requested*	\$	Documentation*	Receipt <input type="checkbox"/> Invoice <input type="checkbox"/>
Purpose of funds* <i>Provide a short description for the use of these funds, which must be used to fulfill your group’s mission.</i>			
Payment due by		Grant expense?	<input type="checkbox"/> Grant name:
Payee name*			
Payee address*			
Other notes			

MAIL OR EMAIL TO:

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