



Schaumburg Educational Employees Organization

SEEO PAID OUT VOUCHER

Date Submitted: _____ Voucher # _____

Amount \$ _____

Submitted by: _____

Payable to: _____

Remarks: _____

Check # _____

SEEO

PAC

Date _____

Code: _____

Notes: _____

*Please send your request for payment along with ORIGINAL RECEIPTS to SEEO Treasurer,
Clara Arnold at Hanover Highlands. Receipts must be submitted within 30 days.*