

# Request for Payment Form

DATE: \_\_\_\_\_

BUDGET CATEGORY: \_\_\_\_\_

EVENT/ACTIVITY: \_\_\_\_\_

Person requesting money: \_\_\_\_\_

Phone + Email: \_\_\_\_\_

Make check payable to (if different): \_\_\_\_\_

Send payment to (address): \_\_\_\_\_

**List of EXPENSE items:**

<u>DESCRIPTION (attach original receipts/invoices/time sheets to this form)</u>	<u>AMOUNT</u>
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**TOTAL EXPENSE \$** \_\_\_\_\_

<u>TREASURER'S USE ONLY</u>	
	Less Tax Amount: \$ _____
Sent by Mail on Date: _____	TOTAL Amount of Payment \$ _____
OR	Date of Check: _____
Delivered In-Person on Date: _____	Check #: _____