

Live Oaks Garden Club

Request For Payment

Please check: _____ for reimbursement to Live Oaks member

_____ for reimbursement to vendor/business

Name: _____
(member or vendor to receive payment)

Address: _____

Telephone: _____

Event/Committee: _____

Reimbursement and \$ amount for:(please itemize)

Check payable to _____ \$ _____

Signature _____ Date _____
(member making request) (being submitted)

RECEIPTS or INVOICE/STATEMENT TO BE ATTACHED

Treasurer's records:

Date paid _____ Check No. _____ \$ _____