

Please <u>submit requests as soon as possible after purchase</u>. Attach receipt(s) to this completed form and deliver to your chairperson, who will approve and provide to the treasurer for payment.

Communication		Event/Project		Fundraising				Other
If other, explain:								
Submitted By:								
Address:								
City:	Goodyear		State:	AZ		Zip:	85395	
Phone:			Email:					
Signature:								
Chairperson Signature:								
LIST EXPENSES AND INCLUDE ORIGINAL RECEIPTS						A	MOUNT	
TOTAL DUE:								
				. 3		<u>∟ •</u>		
Treasurer Use Only								
Treasurer Use Offing								
Amount Reimb	oursed:	\$		I	Date:			
Check No. or F								