

# Request for Client Check Disbursement



PO Box 551

Durham, CA 95938

*Please call for appointment*

**Ph#: 530-774-3641**

**Fax#: 1-888-311-4787**

**cathy@paradisehomemakers.com**

Date: \_\_\_\_\_

Client Name: \_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_ Date Needed by: \_\_\_\_\_

*Please allow at least 48 hours for processing. This does not include mail time.*

Reason and/or Intended Purchase (s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Deposit \_\_\_\_\_ or Mail \_\_\_\_\_ check to \_\_\_\_\_

If Mailing, please provide following information:

Check made payable to: \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Additional notes or Comments: \_\_\_\_\_

\_\_\_\_\_

Client Signature: \_\_\_\_\_

Support Staff Signature: \_\_\_\_\_ Date \_\_\_\_\_

Date

**FOR OFFICE USE ONLY:**

**Disburse Date:** \_\_\_\_\_

**Receipts:** \_\_\_\_\_

\_\_\_\_\_