



## Federated Garden Clubs of New York State, Inc.

292 Washington Ave Ext., Ste 104, Albany, NY 12033 PH: 518-869-6311

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### REQUEST FOR REIMBURSEMENT OR PAYMENT

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

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

Amount: \_\_\_\_\_

For:

Chairman Signature: \_\_\_\_\_

Title or Committee: \_\_\_\_\_

Address:

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

All Officers or Chairman requesting reimbursement for costs incurred on behalf of FGCNYS, Inc. activities or payment made to vendors MUST complete and sign this form, attach itemized bills or receipts, and mail to the address above. No payments will be made without complete documentation.

\*\*\*\*\*For Office Use Only\*\*\*\*\*

Approval to Pay: \_\_\_\_\_

Date Paid: \_\_\_\_\_ Check No.: \_\_\_\_\_ Account Code: \_\_\_\_\_ By: \_\_\_\_\_