PRINT CLEAR FORM

GREATER PACIFIC REGION

The Embroiderers' Guild of America, Inc.

REQUEST FOR PAYMENT

Submitted by: _____ _____ _____

Name | Office or Committee | Date

_____ _____

Address | Telephone No.

Payee (if different from above):

_____ _____

Name | Social Security or Taxpayer I.D. Number

_____ _____

Address | Telephone No.

Please complete all Columns

Purpose	Beginning Budget Amount	Requested Payment Amount	Budget Account Number	Budget Remaining
Telephone				$0.00
Postage				$0.00
Printing				$0.00
Teacher Fees (include dates)				$0.00
Kit Fees				$0.00
Travel				$0.00
Lodging				$0.00
Per Diem				$0.00
Other (itemize)				$0.00
Total		$0.00	Signature	

- ✓ This form must be used whenever a request for payment or reimbursement is made. Please make copies for your use.
- ✓ No reimbursement will be made unless receipts are attached.
- ✓ Include copy of telephone bill with GPR-EGA expenses marked.
- ✓ Postal receipt or personal log of correspondence is acceptable. Reimbursement for copies made on personal copier is limited to a maximum of $0.15 per copy.
- ✓ Receipts or explanation of service, payee, date, and cost must accompany other expenses.
- ✓ Reimbursement over the budgeted amount must be approved in advance by the Region Board.
- ✓ Requests should be submitted in the quarter in which the expenditures occur; in any event, no later than December 1.

Send to GPR Treasurer.