



**GENERAL FEDERATION
of WOMEN'S CLUBS**

GFWS-WS Peninsula District Statement of Bill Or Request for Reimbursement

Please attach the bill and/or receipt along with this completed form and present to the Treasurer.

Your Name _____ Phone _____

Amount of bill _____ Date Presented _____

Check to be made out to _____

Explanation of what the money was spent for: _____

Signature of person submitting bill _____

Address where check is to be sent _____

(For Treasurer's Use Only – Please do no write below this line.)

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Check issued to _____ Check Date _____

Check Number _____ Check Amount _____

Budget Line Item for this disbursement _____

MAIL OR PRESENT COMPLETED FORM & RECEIPTS TO:

Rita Loseth
510 Kincaid Avenue
Sumner, WA 98390