

Request for Payment Form—Belle Haven Women’s Club

--Bill from the Vendor or a Narrative supporting the requested funds must be stapled to this form. The supporting documentation should be limited to only BHWC items—**please do not comingle personal items with BHWC items.**

--All requests for payment must be approved by the Event Chair, or the President if Event Chair is same as the Requesting Member, prior to submission to the Treasurer.

--Please allow 2 days for processing.

Requesting

Member: _____

Check Payable

to: _____

Purpose of the

Request: _____

Event Name/Committee

Name: _____

Amount of the

Check: _____

Send Check to: _____

Signature of Requesting

Member: _____ Date: _____

Signature of Event Chair/

President: _____ Date: _____

Check Amount Issued: _____ Date: _____

Check #: _____

By: _____