



## 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: \_\_\_\_\_