

NORTH CENTRAL CAMERA CLUB COUNCIL

REQUEST FOR PAYMENT

Make check payable to: _____

Send Check to: Name _____

Street _____

City/Zip _____

PLEASE LIST ITEMS AND ATTACH RECEIPTS(S) FOR EACH ITEM:

DATE	ITEMS	PROJECT	COST

TOTAL AMOUNT DUE: \$ _____

Signature: _____ Date: _____

Mail this form and attached receipts to: **Lynda Richards, N4C Treasurer**
4236 228th Ave.
Hartford, IA 50118-8019
515-989-0080

TREASURER'S USE ONLY:

Check No. _____ Date: _____ Mailed: _____ Delivered: _____