

NAPLES ISLANDS GARDEN CLUB
EXPENSE REIMBURSEMENT REQUEST

Treasurer's Use
Date _____
Check # _____

DATE _____

PERSON REQUESTING _____

COMMITTEE/PROJECT _____

REQUESTED AMOUNT \$ _____ ATTACHED ARE RECEIPTS
(itemize on back or attach itemization) RECEIPTS ARE FORTHCOMING

REASON FOR REQUEST _____

MAIL CHECK TO PAYEE REQUESTOR

PAYEE NAME and ADDRESS if other than member

SPECIAL INSTRUCTIONS _____

MAIL REQUEST NIGC
 PO BOX 14688
 LONG BEACH, CA 90803-4688

DROP OFF REQUEST BARBARA JORDON
 18 RIVO ALTO CANAL
 LONG BEACH, CA 90803
 (562) 714-5558 cell

EMAIL REQUEST bjordon9@gmail.com