

(Please attach receipts in upper right-hand corner)

Windy City FEW

Request for Disbursement of Funds

(Please print legibly and use blue or black ink only)

Date Submitted _____

Check Request by _____

Phone Number _____

Check Issued To _____

Address if applicable _____

Amount _____

Date Incurred _____

Committee (if applicable) _____

Reason for Disbursement

(Please list expenditures and attach receipts to this form. No checks will be issued without receipts.)

Signature _____

Please Indicate Payment Pick up Preference

_____ Send Check via mail

_____ Will pick up check from Treasurer

FEW Treasurer Use Only:

Date Paid _____

Date Called (for pick-up)/Mailed _____

Check Number _____

Budget line _____