

SOUTHWEST WASHINGTON PAINT HORSE CLUB
 ... ain't nothing going to break our stride



Request for Funds Reimbursement
Vendor Invoice or receipt MUST be attached

Date:			Amount:		
Purchaser Information (Name of person being reimbursed)			Vendor Information (Name of company where goods or services were purchased)		
Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:

Items Purchased: (Complete description of all items purchased)

Reason for Purchase: (Example: 2008 SWWPHC May show, or 2007 SWWPHC awards banquet.)

Purchaser Signature: _____

Mail to:
 SWWPHC Treasurer
 c/o Tina Lockett
 3801 NE 104th Cir
 Vancouver, WA 98686
 email TINA.LOCKETT@comcast.net

Office Use Only	Invoice Attached: Y or N	GL Acct:	Check No:
			Date Paid: