

**LEHIGH VALLEY N.A.M.E. – SMALL ON SCALE
CHECK REQUEST**

DATE: _____

DISBURSEMENT:

Club Operations

Postage, Telephone, Copies	\$ _____
Project supplies	_____
Other – Specify	_____
Subtotal	\$ _____

State Day

Expense – describe	\$ _____
Subtotal	\$ _____

Miniature Show

Postage, Telephone, Copies	\$ _____
Printing	_____
Supplies	_____
Other – Specify	_____
Subtotal	\$ _____

Total	\$ _____
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PLEASE ATTACH RECEIPTS

Make check payable to:

Name:
Address:

Date paid: _____

Check # _____