



friendship force
Southwest Florida

EXPENSE REQUEST

Date submitted _____

Write check in the amount of \$ _____

Payee's name and address _____

Attach receipts and copy of contract

Event Name _____

Breakdown of amount requested. Example food \$38.40, gifts \$15.00, handouts \$10.20 = \$63.60 Total

\$ _____ for _____

\$ _____ for _____

\$ _____ for _____

\$ _____ for _____

\$ _____ TOTAL REQUESTED (SHOULD BE THE SAME AS CHECK AMOUNT)

If this is for a required deposit (bus, meeting hall, etc.) for a future event, please provide the following information:

Amount requested now \$ _____ Total estimated amount including this deposit \$ _____ Please give any details you feel are needed to help us understand:

Requested by (print your name): _____ Phone number _____

PLEASE SIGN YOUR NAME _____

You may send this request to:

Jane McDonald, Treasurer
800 Lucia Dr
Punta Gorda FL 33950
941 875 2862
janemcdo@yahoo.com