PRIDE CLUB REIMBURSEMENT REQUEST

RECIPIENT ORGANIZATION

NAME: _____

ADDRESS: _____

_____

PHONE: _____

Grant Number:

DATE of Purchase or Activity	NAME of SUPPLIER (Where Purchase was made)	DESCRIPTION OF ITEM AS LISTED IN APPROVED BUDGET	FUNDS TO BE REIMBURSED
		TOTAL	
NUMBER OF SHEETS ATTACHED _____		**TOTAL FROM ATTACHED PAGES**	
		TOTAL FROM ALL SHEETS	

PLEASE ATTACH ALL INVOICES

I assest that all invoices are a true representation of the expenses incurred for the above PRIDE Club.

_____ **Signed by Representative**

_____ **Signed by Preparer**

_____ **Date**

_____ **Printed Name**

_____ **Printed Name**

Revised August 2004