

	Weyburn Communitthon Box 1454 Weyburn, SK, Canada, S4H 3J9 weyburncommunitthon@gmail.com
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PAYMENT REQUEST FORM

Date <i>enter: yy-mm-dd</i>	Description of Costs <i>enter: Vendor / Destination, Items / Reason</i>	Costs (Sub total plus PST)	GST only	Total
TOTAL CLAIM **				\$0.00

Requested By:

Date	
Name	
Address	
City	
Postal Code	
Signature	

Please include original invoices with payment request.

**** IF YOU WOULD LIKE TO DONATE ALL OR PART OF THIS AMOUNT ****

I would like to donate these funds to the Weyburn Communitthon:

\$

Name:

Signature:

Approved By		Payment Date	
Approved By		Cheque Number	