



## NORRISTOWN GARDEN CLUB

### Request for Advance Funding for Anticipated Expenses\*

From: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Project or Account Name: \_\_\_\_\_

Anticipated Expenses: \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

Approved by Committee Chairman: \_\_\_\_\_

*\*Advances will be sent with a form to be returned with receipts for all expenditures and a refund of any unspent funds at project completion. Please send Funding request to:*

Rosemarie Hardy, 774 Moccasin Dr., Harleysville, PA 19438, 215-859-0335

For Treasurer's Use: Date: \_\_\_\_\_ Check # \_\_\_\_\_

Revised 7/19/19