HOG® Hampton Roads Chapter

Payment Request Form

All payments require approval of the Director prior to making the purchase, placing an order, etc. To request reimbursement or payment to be made, please complete the information below and include a copy of the detailed receipt/invoice/quote/etc. Submit to the Director for approval. Once approved, submit to the Treasurer for processing. It can be hand delivered, emailed, or placed in the treasurer folder at the dealership.

Person making request: ____

Phone number: ____

Make check payable to: ____

Name of Company: ____
(if different than payee)

Amount: $ ________________ Type: ☐ Check ☐ Credit Card

Description of expense: ____

____

Requester: ____
Signature Date

- -

Director: ____
Signature Date

Treasurer: ____
Signature Date

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