Epsilon Sigma Phi

Payment Request Form



Request Date	<u>_</u>	
Amount Requested	Receipt/Bill Attached (Can be attached to generated en	nail after clicking "Submit by Email")
Payable to		
Mail to		
Budget Category		
4-H Project Annual Meeting Expense Award Travel Board Meeting Expense Legislative Event Misc. National Meeting Travel National Award Travel PILD Travel Postage President's Discretionary Funds Treasurer Expense	Scholarship Expense Professional Development Fellowships Sid Chandler Tal C. Duvall Fellowship Travel Expense JCEP Chapter Expense JCEP reimbursement to Member PILD Chapter Expense Nat'l ESP Mtg Chapter Expense Nat'l Conference reimbursement to	Annual Meeting Expense 1st Place Poster Winner 2nd Place Poster Winner 3rd Place Poster Winner Award Certificates Awards Program Booklet Food Guest Speaker Lodging Membership Certificates Membership Tokens
In payment for		
Degreeted by		
Requested by		
Requesting Committee		
Notes		
Notes		
Please email this form as an attac	hment to mctrice@dekalbcountyga.go	v
Print a copy and mail to :		
Marie C. Trice		Treasurer Use:
4380 Memorial Dr., Ste. 200		Amount:
UGA Cooperative Extension in DeKalb		Check#:
Decatur, GA 30032		Date Paid: