

ALTRUSA INTERNATIOANL OF ANAHEIM FOUNDATION, INC.
VENDER PAYMENT FORM

DATE	ITEMIZED EXPENSES FOR:	AMOUNT
	TOTAL REIMBURSEMENT	

SIGNATURE OF REQUESTER:

SIGNATURE OF CHAIRPERSON:

SIGNATURE OF TREASURER:

INSTRUCTIONS:

- Specify a budget line item from the list below:
- **Attach receipt(s).**

COMMUNITY

Joya
Blankets with Love
WTLC
Pathways of Hope
Boys Hope Girls Hope
Ronald McDonald House
CWP
Other_____

FESTIVAL OF TREES

LITERACY

Project Dignity
Joya
Pathways of Hope
Anaheim Reads
Creative Writing
Cops 4 Kids
Casa Teresa
Boys and Girls Club
Boys Hope Girls Hope
Other_____

INTERNATIONAL

Madras Sister Club
Club 21 Dues
District & Int'l Foundation Gifts
International Charities
Other_____

SCHOLARSHIPS

Committee Selection

FUNDRAISERS

Festival of Trees
Other_____

DATE PAID _____ **CHECK #** _____ **AMOUNT** _____