



Evergreen Garden Club Payment Reimbursement Request

Date:		Fill in total amount of purchase: \$
Budget area (choose one):	<input type="checkbox"/> Public Gardens <input type="checkbox"/> Garden Tour <input type="checkbox"/> Administrative <input type="checkbox"/> Membership <input type="checkbox"/> Programs <input type="checkbox"/> Holiday Party <input type="checkbox"/> Other: (please explain)	Description: purchase/comments (please identify which public garden)
Your name:		
Your address:		
Your phone #:		
Your signature:		
Please note:	<ul style="list-style-type: none">✓ Please attach/staple original receipt(s) to this form.✓ Present this to the Treasurer (in-person, or mail to POB 1393, Evergreen, 80437)✓ After receiving this information, the Treasurer will request payment from our US Bank account. The check will be mailed to you. That takes about 7-10 days.	



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