



PRINT THIS FORM AND SEND TO:
 AEI TREASURER
 214 E MAIN STREET
 MARSHALLTOWN, IA 50158

REQUEST FOR PAYMENT

- PLEASE STAPLE BILL TO THE BACK OF THIS FORM
- IF REQUESTING ONE PAYMENT FOR SEVERAL BILLS, PLEASE PROVIDE TOTAL ON THIS FORM.
 (ITEMIZE EXPENSES ON THE BACK OF THIS FORM)

FUNDS REQUESTED BY:	
AMOUNT:	
WHAT WAS THE MONEY SPENT FOR:	
PLEASE PRINT YOUR NAME:	
PLEASE PRINT THE ADDRESS YOU WOULD LIKE THE CHECK SENT TO:	
ADDITIONAL COMMENTS:	
SIGNED:	

TREASURER'S USE ONLY

DATE SENT:	
CHECK NUMBER:	
AMOUNT:	
FROM BUDGET ACCOUNT:	