NOCI Check Request(s)

Instructions:

1. Complete form – if you need more space, please attach your own notes. I just need the information clearly documented.
2. Attach receipts
   a. If they are small, tape them to the front or back of this sheet
   b. If they are larger, staple them to this sheet
3. Provide this completed form and receipts to Jackie Radeni, NOCI Treasurer - put them in her mailbox.
4. Reimbursements for members will be made primarily via Zelle.
5. If you have questions – please contact Jackie at jaclyn.radeni@gmail.com

Today's Date:	
Requested by: (your name)	
Your Phone Number:	
How was the payment made?:	☐ I paid for it and NOCI should reimburse me (or another member) ☐ NOCI needs to send payment to the vendor directly ☐ Payment made on NOCI debit card – receipts provided for records only ☐ Other _____
Amount:	
Date of Transaction(s):	
Who Should NOCI Pay?:	
Address: (if check needs to be mailed)	
Zelle Contact Information: (Email or phone registered with Zelle)	
What NOCI Event/Activity was it for?: **(or was it just general supplies?)**	
Description of Expense:	