



Wake Forest Woman's Club

CSP - Charitable Disbursement Form

Paid from CSP Budget

Use for CSP Donations and Expense Disbursements

Please check with CSP Chair to ensure you are using the correct form.
Incomplete forms will be returned to submitter for completion.

Date: _____

Amount: \$ _____

Payable to: _____

Mailing Address: _____

Contact Person: _____ Phone: _____

Charitable Project Information _____

Receipt/Bill: Original or Copy of Receipt/Bill must be attached to receive reimbursement **within 30 days** of the date on the receipt or bill.

Person Requesting Reimbursement (if different from above):

Print Chair's Name. _____

X _____ Date: _____

CSP Chair Signature Required

CSP Required: _____

Check(✓) which applies below.

- 1. Give/mail check to member.
- 2. Member will write own letter to charity and deliver/mail it with the check.
- 3. Treasurer will mail check with club letter to charity.

*****TREASURER CANNOT APPROVE FORM*****

Finance Committee Member Form Approval (with all required attachments):

_____ Date _____

****DO NOT WRITE BELOW THIS LINE. FOR TREASURER USE ONLY.****

Date Paid: _____

Check # _____