**N. I. G. C. REIMBURSEMENT REQUEST**

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REQUEST AMOUNT: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FOR\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_COMMITTEE

REASON FOR REQUEST\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME (as it appear on your Bank Account):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE:\_\_\_\_\_\_\_\_ZIP: \_\_\_\_\_\_\_\_

PHONE: \_\_\_\_\_\_\_\_\_\_\_

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAIL, SCAN OR EMAIL FORM TO: ROSE (DUCKY) CASWELL

5625 NAPLES CANAL

LONG BEACH, CA 90803

[duckyrcaswell@gmail.com](mailto:duckyrcaswell@gmail.com)

Check No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Check: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_