

Order Sons of Italy in America Grand Lodge of Virginia

Request For Payment/Reimbursement of expense

Date:

I certify the following expenses were/will be incurred by me: (Attache reciepts as available)

PURPOSE	AMOUNT
Total this Request	\$0.00
Requested by:	

Check to be payable to:

Approved; (State Financial Secretary)

Payment Made: (State Treasurer) Date: _____ Check No. _____