## COFTINE SAN ATTORIO PUBLIC PUB

## Friends of the San Antonio Public Library

## **REQUEST FOR FUNDS**

NOTE: All requests for payments MUST be accompanied by receipts, invoices, etc. Tape receipt(s) to a sheet of paper and attach the sheet to this request, or scan receipts and email with form.

BRANCH OR SUPPORT GROUP:  PERSON MAKING THIS REQUEST:		TODAY'S DATE:	
		PHONE:	
Amount	Purchase Description/Vendor	Category (Check one)	(PRINT) Issue & Mail Check to:
		Group operating expense Staff appreciation	
		Purchases for use by SAPL, to benefit the public or a library facility	
		Group operating expense Staff appreciation Purchases for SAPL	
		Group operating expense Staff appreciation Purchases for SAPL	
cl	ick button to clear information c	on form	
Mail this for	m and supporting information to	o: FOSAPL, P.O. BOX 461523	SAN ANTONIO, TX 78246-1523
Or mail to:	Barbara Morrow, FOS	APL Treasurer 3534 Ironwoo	d Fls San Antonio, TX 78261
Or send fo	rm and scanned/copied attachn	nents to: fosapitreas@g	mail.com