**GFJ Individual Youth Funds Payment Request Form** **DATE:** _____

Name: _____

Event: _____

Check one and complete filling out the section:

___Request $_____from my account to pay for this event

___Reimburse me $_____for payments I've made for this event

Send payment to: _____

Address: _____

_____

Approved by Group Leader _____

(Group Leader submits the original copy to the GFJ recorder)

Modified 6/04

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