**OTVARC and SEA-PAC Payment Request**

**Date:** Click or tap to enter a date.

|  |  |  |
| --- | --- | --- |
| **This expense is for:** | OTVARC |[ ]  SEA-PAC |[ ]
| **Make Payment to:** | Me |[ ]  Another person or Business |[ ]
| **Payment Method:** | Check |[ ]  Please Pay via Credit Card (only for business payments) |[ ]

**Payment Instructions** Attach all receipts, payment instructions, email documentation, invoices, contracts, etc.

|  |  |
| --- | --- |
| **Check Payable to:** |  |
| **Send Payment to:** |  |
| **Address:** |  |
| **City, State, Zip** |  |

|  |  |  |
| --- | --- | --- |
| **Items** | **Amount** | **Account or SEA-PAC Committee to Charge** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total:** |  |  |

**Business Justification** Please provide an explanation of the business purpose for the purchases

Click or tap here to enter text.

**Signatures and Approvals** For SEA-PAC, approvals must be from the Committee Chair or the Event Chair.

|  |  |  |  |
| --- | --- | --- | --- |
| **Requestor Signature:** |  | **Call Sign:** |  |
| **Requestor Email:** |  | **Requestor Phone:** |  |
| **SEA-PAC Committee or Event Chair Approval:** |  | **Call Sign:** |  |

**Submit Completed Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **For SEA-PAC:** | Email to reimbursement@seapac.org | **For OTVARC:** | Email to reimbursement@otvarc.org |

**Office Use Only**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date Paid:** |  | **Payment Number:** |  |
| **Recorded:** | SEA-PAC [ ]  OTVARC [ ]  |

*Revised: October 25, 2022*