## Loveland Community Club

Income and Expense Request Form

Date of Request	Type of Request ☐ Expense ☐ Income
	Event Description
Event Name (e.g. Ice Crean	m Social)
Type of Expense or Income	e (e.g. Food, Games, Supplies, Security)
Perso	on or Company to Reimburse (if Expense)
Name	
Address	
Amount Requested \$	
	Requestor Information
Name	
Address	
Phone Number	
Title	
Signature of Requestor	
Ex	pense requests: Attach all receipts and mail to:
Jack	kie Anderson, Loveland Community Club Treasurer 8105 Howard St Omaha, NE 68114
Income requests: Attach al	II funds and contact Jackie Anderson at 402-905-2809 for transfer in person