

LOMA PRIETA REGION
PORSCHÉ CLUB OF AMERICA

REQUEST FOR PAYMENT

The undersigned requests payments from the club funds:

Code <small>(see below)</small>	Amount	Description
Total		

Pay to the Order of:	
Address:	
Print Name:	
Signature:	Date:

- Codes:**
- | | |
|------|----------------------|
| AD | Administration |
| A | Auto Cross |
| BM | Board Meetings |
| C | Charity |
| G | Good Time Gatherings |
| GS | Goodie Store |
| M | Membership |
| MISC | Miscellaneous |
| P | Prieta Post |
| R | Rallye / Concours |
| T | Tours |

FOR CLUB USE ONLY:
CHECK NO:
DATE PAID:

MAIL signed forms to: LPR - PCA P.O. Box 705 Santa Clara, CA, 95052-0705
