

OREGON LIBRARY ASSOCIATION  
Grants  
EXPENDITURE REIMBURSEMENT REQUEST FORM (ERRF)

Date:

Make Payable To:

Address/City/State/Zipcode:

Phone Number:

Fax:

Grant Name:

Authorized By:

Grant to be used for expenditure:

Each request must be authorized by the grant coordinator. Requests without an appropriate signature will be referred back to the committee, round table or division. This can result in significant delay in processing payment. Please apply charges to grant budget line listed below.

**CHECK APPLICABLE CATEGORIES AND ENTER AMOUNT IN EACH. PLEASE REMEMBER TO ATTACH RECEIPTS.**

X	Category	Amount		
	Personnel			
	Fringe Benefits			
	Travel			
	Equipment			
	Supplies			
	Contractual			
	Library Materials			
	Indirect Charges			
	Other			
	<b>Total</b>	\$		

**Submit to:**

Shirley Roberts  
Oregon Library Association  
PO Box 3067  
La Grande OR 97850  
Phone: (541) 962-5824  
sroberts.ola@gmail.com

**Questions or Problems:**

Stuart Levy  
OLA Treasurer  
Parkrose High School  
Phone: ((503) 808-0059  
olatreasurer@olaweb.org