LOCAL LEAGUE USE OF EDUCATION FUND - INCOME & EXPENSE SUBMISSION FORM

Date Submitted___________________
League Name:_________________________________________________________________________
League Address:________________________________________________________________________
Contact Person:________________________________________________________________________
Email Address:______________________________  Fax:_______________________________________
Project Name: ______________________________________________ Project Date:________________
Date Event was pre-approved:____________________________________

INCOME (If any):
Enclosed please find _________checks for a total of $_______________ to be deposited in the
LWV______________________________________ Education Fund account.

EXPENSES:
Enclosed are ____________ invoices for a total of $___________________ to be paid out of the
LWV______________________________________ Education Fund account. Reimbursements should be “bundled”
to be $100 or more.

Please note: Reimbursement is to the local league only, unless it is PMP payments to US or IL. You can
choose to be reimbursed by check or ACH deposit (please attach a voided check for routing
confirmation).

Name of Local League/check payable to:___________________________________________________
Address:_______________________________________________________________________________
City/State/Zip:___________________________________________________________________________

Attn:___________________________________________

Amount $:_______________________

For ACH Submission (to local league operational account):
Bank Name:_____________________________________________________________________________
Routing Number:___________________________________________________________________________
Account Number:___________________________________________________________________________

Include a voided check
For PMP Payments Only - **Not to Exceed 50% of PMP for either LWVUS or LWVIL**

PMP Payment to **LWVUS Education Fund** (please attach copy of PMP invoice from LWVUS):

Amount $:_________________________

PMP Payment to **LWVIL Education Fund** (please attach copy of PMP invoice from LWVIL):

Amount $:_________________________