

Benton County Reimbursement Check Request Form
for Agriculture & Wildlife Protection Program (AWPP) Grant Recipients

Your request must include:

- ✓ This completed form
- ✓ All matching itemized receipts
- ✓ Completed IRS **W9 Form**

Department: Benton County Public Works

Recipient Information (Must be completed)

Name: _____

Address (line 1): _____

Vendor Number: N/A

Address (line 2): _____

1099 not required.

City/State/Zip: _____

Tax ID number: _____

Telephone No: _____

(attach completed W9 form)

CHECK REQUEST

NOTE: Supporting documentation must be attached

- I would like my check mailed to the address above. Date of Request: _____
- Please return check to Public Works for pickup at 360 SW Avery Ave, Corvallis OR 97330

<u>Item Description</u>	<u>Vendor/Store</u>	<u>Amount</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
Total Reimbursement Request:		\$ _____

Benton County Authorized Signature: _____ Date: _____ Budget Line: 102-41-20-461-690016 FY _____ / _____
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