

# Albrecht's Delafield Market Funds For Friends

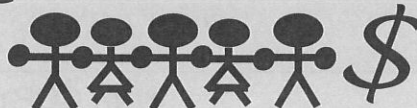
## Payment Request Form Completion Instructions

1. Only receipts from Albrecht's Delafield Market are eligible.
2. An adding machine tape must be attached to the receipts.
3. The receipts can only be six months old to current date.
4. The tapes should all be facing the same direction (face up) to make verification easier.
5. Failure to comply with all of the above instructions could result in a delayed payment.
6. Solicitation of tapes on Albrecht's Delafield Market premises will not be permitted.
7. Please try to submit a minimum of \$1,000 in eligible receipts. So, payment to organization will be minimum of \$10 (1%).

***Good Luck With Your Fund Raising Project!***

**Sentry**  
*Albrecht's*  
DELAFIELD MARKET

*Funds  
for  
Friends*



**\$ FUNDS  
\$ \$ FOR  
FRIENDS**



3255 Golf Rd.  
Delafield, WI 53018  
262.646.9483

**PAYMENT REQUEST**

**TO: "FUNDS FOR FRIENDS" PARTICIPANTS:**

Please read the reverse side for completion instructions. Failure to comply with all instructions will result in a delayed payment or receipts being returned to you.

NAME OF ORGANIZATION - AS STATED ON YOUR APPLICATION

ADDRESS

CITY, STATE ZIP CODE

SIGNATURE OF ORGANIZATION REPRESENTATIVE

**SUMMARY OF SALES RECEIPTS 1%**

**TOTAL RECEIPTS SUBMITTED** \$ \_\_\_\_\_

<b>OFFICE USE ONLY</b>	
TOTAL INELIGIBLE RECEIPTS	_____
TOTAL ELIGIBLE RECEIPTS	_____
ELIGIBLE RECEIPTS X 1%	_____
DATE RECEIVED	
PROCESSED BY	APPROVED BY →

WHITE COPY: SEND TO STORE

PINK COPY: RETAIN FOR YOUR RECORDS