

WAE4-HYDP Invoice Transmittal Form

Committees (check appropriate committee)

Board of Directors

Awards and Recognition

Membership

National Conference

Communications

OTHER: _____

Name of Line Item:

Amount of Check:

Name to appear on the check:

Address to send check to:

Signature of authorizing committee representative:

Mail Transmittal Form and Receipt to:

Heather Schmitz
311 E Miner Ave – Suite S140
Ladysmith, WI 54848

DO NOT WRITE BELOW THIS LINE

Date Paid:

Check Number:

Initials: