



Ladera Ranch Education Foundation

<http://www.LREFonline.org>

MAIL

27762 Antonio Parkway, L1-306
Ladera Ranch, CA 92694

FAX

(949) 682-4871

E-MAIL

Grants@LREFonline.org

LREF GRANT PAYMENT REQUEST

Name _____ Date: _____

School _____

Email address _____ Phone _____

Grant Title _____

Original Grant Award Amount \$ _____ **

Amount Requested \$ _____

Balance Remaining \$ _____

____ Invoice attached ____ Receipt attached

Grant Completed? ____ Yes ____ No

Write check to:

Name/Company _____

Address: _____

City, State & Zip _____ (____) _____
Phone

**Note: Amounts requested in excess of original award will not be reimbursed.

For LREF Use Only:

Approved:

Name and LREF Title _____

Approval Date _____

Check Date _____ Check Number _____