

CHECK REQUEST

CR1004

OL Productions

1041 Formosa Ave., SMBW 216
Los Angeles, CA, 90046
323 850-2855

Date: 05/15/2015

Check Due Date: 05/19/2015

AMOUNT: \$ 178.73

Vendor Name: Tijana Agic-Gaudio
Address: 4917 Medina Dr.
City/State/Zip: Woodland Hills, CA, 91364
Federal ID #: T0-0000137
(Social Security or Federal ID number required for payment)

Contact: _____
Phone #: _____
Fax #: _____

(circle one) ☒ Purchase ☐ Rental

Rental Begins: _____
Rental Ends: _____

DESCRIPTION: Art P/C reimbursement

APPROVED 05/20/2015

Requested By: Allison Schwartz

Allison Schwartz 05/15/2015
Marina Agasyan 05/18/2015
Tim Tortora 05/20/2015

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GL / Prod	Amount	Desc
1100	178.73	Art P/C reimbursement