

CHECK REQUEST

CR1006

OL Productions Corporate

1041 Formosa Ave., SME Building 111/113
West Hollywood, CA, 90046

Date: 2015-06-30

Check Due Date: _____

AMOUNT: \$ 250.00

Vendor Name: Allison Schwartz

Address: 1119 N. Genesee Ave #3

City/State/Zip: West Hollywood, CA, 90046

Federal ID #: T0-0000100

(Social Security or Federal ID number required for payment)

Contact: \$

Phone #:

Fax #:

(circle one) ☒ Purchase ☐ Rental

Rental Begins: _____

Rental Ends: _____

DESCRIPTION: Office P/C Float

Requested By: Allison Schwartz

Allison Schwartz 07/01/2015

Marina Agasyan 07/01/2015

Distribution

GL / Prod	Amount	Desc
1100	250.00	Office P/C Float