

I.R.S. Required Document

To comply with Internal Revenue Service guidelines on recording non-member revenue, the following information must be obtained for all events of more than eight people.

I have paid for the services and will not be reimbursed for non-member charges. Yes No

If yes, please complete Member Only Information section.

If no, please continue with Non-Member Information.

Non-Members: Please Complete

Event Name: _____

Contact Name: _____

Address: _____

City, State & Zip Code _____

Total Number in Group _____ Number of Non members in Group _____

*This reimbursement is 1.) By non-member individual or employer or 2.) Direct bill.

Please fax to Janine @ 336-1627

Members Please Complete

Name of member-sponsored group: _____

Business, personal or social purpose of the member served by the attendance of the group: _____

Member's Signature _____

MCC Office Use Only

Account Number _____

Date of Event _____

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