

## REQUEST FOR RELEASE OF PROCEEDS

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Re: Lease Number \_\_\_\_\_

To: Shelly Sweeney  
Office of the State Treasurer  
PO Box 40200  
Olympia, WA 98504-0200

Shelly's contact info: 360-902-9005 or [shelly.sweeney@tre.wa.gov](mailto:shelly.sweeney@tre.wa.gov)

From: Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Entity: \_\_\_\_\_  
Statewide Vendor No. \_\_\_\_\_

The amounts (\$\_\_\_\_\_) for which payment and/or reimbursement is requested constitute proper costs of acquisition, construction and/or installation of the property being financed by lease number \_\_\_\_\_ with proceeds of the state's Certificates of Participation. These amounts are properly chargeable to the capital account and represent true and accurate expenditures.

We request that the Office of the State Treasurer make:

- Reimbursement – We have made payments to vendor(s) per attached invoices and proof of payment(s).
- Payment to vendor\* (**Local governments only**) – I have attached the invoice(s) that we are requesting be paid.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

\* NOTE: The vendor(s) and/or entity receiving payment must be registered with the Department of Enterprise Services before funds can be released:

<http://des.wa.gov/services/ContractingPurchasing/Business/VendorPay/Pages/default.aspx>