



**PARTICIPANT'S REQUEST FOR SCHOLARSHIP FUND DISBURSEMENT**

I request that you disburse funds, which are held in trust for my educational expenses to the following payees. I have attached the required documentation to this form for your review. I understand that the processing of this request will require approximately three weeks.

Expense From	Describe Expense Purpose	Amount \$

**You must attach original invoice offer documentation, or a written statement explaining why no receipt is available.**

I certify that these funds will be used to further my education or vocation in the following course of study. (Describe the degree program, course of study, vocation or course for which funds are requested. If an expense benefits, but is not part of a degree program, describe how the program will enhance your educational process.) Questions? 918.461.9595 or [mop8908@aol.com](mailto:mop8908@aol.com)

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Mail this check to:		My permanent address:	
Signature:	Print name:	SSN:	Phone number:

**FOR OFFICE USE ONLY**

Date Rev'd	Account Balance	Approved by	Date paid	Check #	Amount Paid \$

**Mail to: MISS OKLAHOMA SCHOLARSHIP PAGEANT  
10026-A South Mingo Rd #287  
Tulsa, OK 74133**