



Swoop of Cranes
Artists Supply
Reimbursement Request



Maximum Reimbursement Amount: \$50.00 per crane

**If mailing, send request to:
Monte Vista Chamber of Commerce
947 1st Ave
Monte Vista, CO 81144
Email: chamber@montevistachamber.org**

Date of Request: _____

Number of cranes: _____

Sponsor Name(s) (First - Last): _____

Sponsor Business Name(s) (if applicable): _____

Artist Name (First - Last): _____

Artist Signature: _____

Mailing Address: _____

Physical Address (if different): _____

Email: _____

Phone: _____

Please allow up to two weeks after your request to receive funds.

Thank you for your participation in this project!