



RED RIVER QUILTERS GUILD PAYMENT VOUCHER

(Use a separate form for each payee.)

DATE: _____

Receipts, invoices, and/or supporting documentation MUST be attached.

Item Descriptions:

Amount:

- | | | | |
|-------|-------|----|-------|
| 1. | _____ | \$ | _____ |
| _____ | | | |
| 2. | _____ | \$ | _____ |
| _____ | | | |
| 3. | _____ | \$ | _____ |
| _____ | | | |
| 4. | _____ | \$ | _____ |
| _____ | | | |

Make check payable to: _____ **TOTAL: \$** _____

If check is to be mailed, where should it be sent?

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

★ **Requester's Signature:** _____ **Date:** _____

For Treasurer's Use Only

Date	Check #	Fund	Account	Amount	Date Cleared
			Ck Svg	\$	

Treasurer's Signature: _____ Date: _____

Approvals Needed: