

THE SCRAPBAG QUILT CLUB TREASURER
REQUEST FOR REIMBURSEMENT /PAYMENT/DEPOSIT

DATE: _____

REQUESTOR: _____

Please be legible

CHAIRPERSON APPROVAL: _____

THIS IS A BUDGETED ITEM YES _____ NO _____

IF NO HOW WILL THIS BE FUNDED? EXPLAIN

REIMBURSEMENT _____

BILL PAYMENT _____

TOTAL AMOUNT \$ _____

PURPOSE OF

EXPENSE: _____

ORIGINAL RECEIPTS MUST BE ATTACHED.

TREASURER:

RECEIPTS ATTACHED _____

IDENTIFY THE BUDGET LINE ITEM THIS WILL BE CHARGED TO:

AMOUNT PAID: _____

CHECK NUMBER: _____

DATE: _____

DEPOSIT PREPARED BY MEMBER OR TREASURER

DEPOSIT

DATE: _____

REQUESTOR: _____

IDENTIFY SOURCE OF FUNDS: _____

IF MULTIPLE SOURCES STATE HOW MUCH AND EACH SOURCE:

\$ _____ SOURCE _____

\$ _____ SOURCE _____

\$ _____ SOURCE _____

\$ _____ SOURCE _____

TOTAL \$ _____

DATE DEPOSITED: _____

TREASURERS SIGNATURE: _____