

PAYMENT OR REIMBURSEMENT VOUCHER

DATE _____

SUBMITTED BY _____

COMMITTEE/EVENT _____

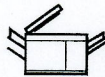
PAY TO THE ORDER OF _____

AMOUNT _____ APPROVED BY _____

1. PLEASE FILL OUT THIS FORM COMPLETELY.
2. RECEIPTS, INVOICES, OR CONTRACTS MUST BE ATTACHED TO THIS FORM IN ORDER TO RECEIVE PAYMENT OR REIMBURSEMENT.
3. PLEASE WRITE A DESCRIPTION ON THE RECEIPTS OR INVOICES.
4. GIVE THIS FORM WITH ATTACHED DOCUMENTATION TO THE TREASURER.

For Treasurer Use Only

CHECK NO. _____ DATE PAID ___/___/___



PLEASE BE A COPY CAT!

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