

NORTH PITTSBURGH QUILTERS GUILD
Check Request & Expenses Reimbursement Form

Date: _____ Member Submitting Form: _____

What Committee, Project or Officer (e.g. Programs, Quilt Show, President):

Itemization of Expenses	Amount	Receipt (Y/N*)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Use back of form if necessary. TOTAL: \$ _____

* Please attach receipts. If no receipt available, please explain expenses:

Make Check payable to: _____

Mail Check to: _____

Additional Information: _____

Member Signature: _____

~ Treasurer's Use Only ~

Approved by: _____ Budgeted Y/N? _____ Check #: _____

Line Item: _____ Date: _____