

GATEWAY QUILTERS' GUILD
Request for Payment Voucher

DATE:

NAME:

AMOUNT:

PURPOSE FOR EXPENDITURE:

SIGNATURE

Receipt for expenditure must be attached to voucher.

```
          ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** ** **
** Date:                                     **
**                                           **
** Ck #:                                     **
**                                           **
** Amt.                                     **
**                                           **
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