Expense Voucher Mountain Stars Quilters Guild

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Date:			Date:		
From:			From:		
Phone:			Phone:		
Account Name:			Account Name:		
Check Payable to:			Check Payable to:		
Name:			Name:		
Address:			Address:		
City, State, Zip:			City, State, Zip:		
Expense Description		\$ Amount	Expense Description		\$ Amoun
		\$		· · · · · · · · · · · · · · · · · · ·	\$
		\$			\$
		\$			\$
		\$			\$
					
	Total:	\$ \$		Total:	\$ \$
**************************************	*********	******	For Treasurer's Use only	**********	*******
Date Received:	Date Paid:		Date Received:	Date Paid:	
Check#:	Amount:		Check#:	Amount:	
Account Name			Account Name		
Notes			Notes		