



P.O. Box 1312, Fort Washington, PA 19034

## PAYMENT VOUCHER

- Instructions:**
1. Complete items 1 through 6. (You can make entries directly into this form.)
  2. Either save a copy of the form on your computer or print it out.
  3. Submit the form and receipts to the Financial Secretary (address below) by e-mail or mail. For assistance with this form, contact Tom Jennings at [Financialsecretary@midatlantic.usatf.org](mailto:Financialsecretary@midatlantic.usatf.org)

1. Pay to: \_\_\_\_\_

2. Send to: \_\_\_\_\_

Address: \_\_\_\_\_

3. For: \_\_\_\_\_

4. Charge to:

Budget: \_\_\_\_\_ Line item: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Budget: \_\_\_\_\_ Line item: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Budget: \_\_\_\_\_ Line item: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

**TOTAL:** \$ \_\_\_\_\_

5. Requested by: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

6. Committee Chair/Officer: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Signature*

7. Approved by Financial Secretary: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Signature*

8. Reviewed by President: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Signature*

9. Check issued by Treasurer: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Signature*

Voucher number: \_\_\_\_\_ Check number & Date: \_\_\_\_\_

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