



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

PAYMENT VOUCHER v2_2025

- 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

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: _____

Tom Jennings – Financial Secretary
Financialsecretary@midatlantic.usatf.org

Robin Jefferis – President
President@midatlantic.usatf.org

Open Position – Treasurer
Treasurer@midatlantic.usatf.org