

Taylor Choir Booster Club Reimbursement Voucher

(To be used when requesting a check from the treasurer.)

Payable to: _____ Date needed: _____

Address: _____ Phone #: _____

Check requester: _____ Date requested: _____

Account to debit: _____

(If voucher reflects more than one account, Madrigal Dinner, Pop Concert, Scholarship Banquet, etc., please identify account and amount that should be deducted from each.)

	\$		\$
	\$		\$

Item	Place of Purchase	Amount
	Total:	

(Sales tax will **not** be reimbursed. Tax documentation can be obtained from the treasurer.)

Treasurer's Notes:

Invoice Received: _____

Date Approved: _____

Check Number: _____

Amount of Check: _____

Remarks:

Chairman's signature: _____

Treasurer's signature: _____

President's / Vice President's signature: _____