Issaquah Garden Club -- Expense Voucher

Be sure to sign and attach supporting receipts! Then give or send to the Treasurer.*

Date: Requester: Signature of Requester:			
		(REQUIRED)	
COMMITTEE or PROJECT (e.g. Garden Therapy)	DESCRI (e.g. flowe	PTION OF ITEM(S) ars for care home centerpieces)	AMOUNT
TOTAL REQUEST:			\$
* To be reimbursed, a member must subm Treasurer) within 90 days of the date of Vouchers may be given to the Treasurer Vouchers, including the supporting rece	purchase or be	ailed to the Treasurer (see yearbook	for address).
This section for Treasurer's use o	nly.		•
Paid to:			
			Check No.
Budget Code: Date:		Treasurer's Initials:	CHECK IVO.