

FARMINGTON VALLEY QUILTERS
CHECK REQUEST FORM
Receipts and/or Invoices MUST be attached

DATE: _____ PAYABLE TO: _____

MAILING ADDRESS: _____

REASON FOR REQUEST: _____

	DESCRIPTION	AMOUNT	EXPENSE CATEGORY
1			
2			
3			
4			
5			
6			
7			
8			

TOTAL AMOUNT REQUESTED: _____

REQUESTED/APPROVED BY: _____

IMPORTANT NOTES:

- Invoices, receipts for reimbursement, contract, or other relevant backup must be submitted with this request.
- Requests for reimbursement of meals should include a detailed receipt. Alcohol purchases will not be approved.
- Requests should be submitted at a monthly meeting, or can be mailed to the guild at:
FVQI Treasurer, PO Box 172, Weatogue, CT 06089

FOR TREASURER USE: DATE PAID _____ CHECK NUMBER _____