

Incoming cash/Request for Payment

(please circle one or both if it applies)

Date: _____

Name: _____

INCOMING CASH

AMOUNT:

_____	CHECKS	
_____	CASH	Initials of Counters: _____
_____	TOTAL RECEIPT	

EVENT/COMMITTEE SUBMITTING INCOME _____

REQUEST FOR PAYMENT - ATTACH ALL RECEIPTS , MAKE A COPY FOR YOURSELF

Desc of expense (use back of form if needed)	Cost
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL AMOUNT SUBMITTED: _____

EVENT/COMMITTEE SUBMITTING EXPENSE _____

PAY TO THE ORDER OF _____

APPROVED BY _____

Treasurer's use

Account: _____

Check number: _____

Amount: _____

Date check written: _____

