

Nashville Calligraphers Guild

CHECK/REIMBURSEMENT REQUEST FORM

1. All original receipts must be stapled to this sheet (no loose paper). Keep copies for your records.
2. Provide a second copy of any contract or other material that is to be mailed with the check.
3. Committee chairs: please contact the Treasurer in advance of event if you are anticipating exceeding your budget.

DATE SUBMITTED: _____ NUMBER OF PARTICIPANTS _____

SUBMITTED BY: _____

Workshop Membership Newsletter Administration

BUDGET CATEGORY: Exhibit Other: _____

MAKE CHECK PAYABLE TO: _____

SEND CHECK TO: _____

ADDRESS: _____

PHONE NUMBER: _____

EXPENDITURES: Description	Quantity	Total Amount

Additional Comments:

TOTAL REQUESTED

Signature of person completing form: _____

To be completed by Treasurer:

CHECK # _____ DATE _____ ACCOUNT # _____