



Coastal Quilters Guild, Inc.
of Santa Barbara and Goleta, California

REQUEST FOR PAYMENT

TO: Coastal Quilters Guild
Attn: Sandra O'Meara
PO Box 6341
Santa Barbara, CA 93160

Date: _____

I request payment for the following (check boxes that apply):

___ Reimbursement to me for (attach receipts and itemize here):

\$ _____

\$ _____

___ Make check payable to: _____

For payment of _____ for \$ _____

___ Expenditure is listed in the budget under _____
(Category or item)

___ Expenditure has been authorized by the Board in minutes dated _____

(Signature of requester)

___ Mail check to: _____

___ Call when ready for pick up at (phone number): _____

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For Treasurer's Use:

Paid Date _____

Check No _____

Posted under _____

Add'l Approval _____