HERITAGE QUILTERS GUILD

P.O. Box 35
Napanee, Ontario K7R 3L3

Expense Voucher

Name _____ Date _____

Address _____

City _____ Postal Code _____

DATE	DETAILS OF EXPENSE	RECEIPT	TOTAL

TOTAL AMOUNT $ _____

This is to certify that the amounts shown on this statement were incurred by me on behalf of Heritage Quilters Guild

Approved by: _____

Signature _____

_____

Date _____

Paid by cheque No. : _____