

THUMB BUTTE QUILTERS GUILD

DATE PAID _____

REIMBURSEMENT/DEBIT EXPENSE REQUEST

CHECK #/Debit _____

DEPARTMENT _____

AMOUNT OF EXPENSE: \$ _____ *(Attach receipt for TBQ expenses only, no personal items on receipt, please)*

EXPENDITURES FOR: _____

MAKE CHECK PAYABLE TO: _____

OR: DEBIT PAID TO: _____

SIGNATURE REQUESTER/DEBITOR: _____

APPROVED BY _____

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