

Waterloo County Quilters' Guild Request for Reimbursement Please attach all invoices/receipts.

Name: K					
Signature:					
Date		Reason for P	urchase	Amou	nt
Total of Request for Reimbursement				1	
***	***	> > > > > > >	****	***	***
Reimbursement authorized by two signing officers of the executive:					
Cheque written:					
Ву	Date		Cheque#		Cheque Amount
Category to charge:			Amount:		