

DATE PAYMENT REQUIRED: \_\_\_\_\_

# Pikes Peak Radio Amateur Assn. PAYMENT VOUCHER

DATE: \_\_\_\_\_

PAID BY DEBIT CARD (name) \_\_\_\_\_

**OR**

CHECK PAYABLE TO:

Name \_\_\_\_\_

Voucher Prepared by : \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

APPROVED BY PPRAA BOARD (date) \_\_\_\_\_

Expense details: (PLEASE ATTACH RECEIPTS OR INVOICE TO BACK OF THIS VOUCHER)

Description of Expense	Activity	Amount	

Total amount requested:

\$

Comments or further explanation:


DELIVER OR MAIL COMPLETED VOUCHER TO TREASURER

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FOR TREASURER'S USE:

Check # \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Date Issued: \_\_\_\_\_

**OR**

Debit Card: Amount \$ \_\_\_\_\_ Date Entered: \_\_\_\_\_