EMBROIDERERS' GUILD OF VICTORIA

FUNDS SUBMITTED REQUEST

Date: _____
(MM/DD/YYYY)

Requester: (print name) _____

Event / Function / Position: (print) _____

Date:	Description:	Amount:
	Total amount submitted →	

SIGN OFF Signatures **Please don't forget to attach your supporting documentation!**

Event / Function / Position / Coordinator Signature: _____

AND Submitter Signature: _____

Submit To:
EGV Treasurer

Internal use only

Received by: _____
Treasurer initials

GL Code:

Date received:

Deposit Date:

Aug 2015