

Voucher
Portage County Master Gardeners

Select One: Disbursement/Pymt Deposit Other: _____
 Attach all receipt copies to back of this form

Itemization of Costs/Deposit

Date	Committee/Description	Dollar Amt
Total		\$

Payee Information (if applicable)

Name:
Street Address/PO Box:
City / State/Zip
Phone

Requestor:

Approver*:

*Approver must be chair or co-chair of committee

Treasurer or Designate (complete information below)

Processed By:	Bank Acct: <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> CD	
Check # (if applicable)	Date Processed:	General Ledger #: