***For Treasurer’s Use***

***Date of Deposit/Check:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Check # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**BAYSIDE QUILTERS OF THE EASTERN SHORE, INC.**

***Directions:***

* Fill out information requested below
* Attach original or copies of receipts
* Submit to treasurer

***NO CHECKS WILL BE WRITTEN WITHOUT COMPLETED PAPERWORK***

Submission of Income/Deposit by: Request for Payment/Check by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Explanation of income/expense** | **Amount** | **Total Amount** |
|  |  |  |  |
|  |   |  |  |
|  |  |  |  |
|  |  |  |  |
|  |   | TOTAL |  |

If payment is to be made to someone other than a guild member (i.e., a speaker or teacher) fill out the following:

|  |
| --- |
| Name of payee:  |
| Address of payee:  |