



**Southwest Florida Quilters Guild
2024 Quilt Show
Payment/Reimbursement Form**

Attach all receipts to this form and **make a copy for your records.**

Date: _____ Sub-committee _____

Sub-committee budgeted amount: _____

Expenditure: _____

Remaining sub-committee budget: _____

Payable to: _____

Address: _____

Phone #: _____

Signature of Payee: _____

Expenditure For: _____

Sub-committee Lead's Signature _____

Show Committee Chair's signature if expense exceeds budget. _____

For Treasurer's Use

Date: _____ Check #: _____

Other notes: _____