

**GEORGIA QUILT COUNCIL REIMBURSEMENT REQUEST FORM**

\*\*\*\*\*Please PRINT all information\*\*\*\*\*

TO: Georgia Quilt Council  
c/o Pomelia Wasdin, Treasurer  
2790 Ebenezer Road  
Conyers, GA 30094  
770-929-8715  
treasurer@georgiaquiltcouncil.com

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

Please make reimbursement in the amount of \$ \_\_\_\_\_

Payable to: \_\_\_\_\_ (name)

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

**ALL INVOICES/RECEIPTS/SALES SLIPS MUST BE ATTACHED**

**Please provide a detailed list of all expenses to be reimbursed:**

ITEM	AMOUNT
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
<b>TOTAL</b>	_____

\*\*\*\*\*

**TREASURER'S USE ONLY: \$** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Check #** \_\_\_\_\_