LCMGV Payment Voucher - 2023

Submitted by: _____

Date: _____

Project: _____

Expense Description: _____

Amount Requested: _____ Receipt(s) Enclosed? ___

Check Payable to if other: _____

= =

Total Amt Paid:	Acct #	$$
Check #:	Acct #	$$
Check Date:	Acct #	$$

Treasurer: Kitty Guinsler 614-940-6782

kittyguinsler@yahoo.com