



# Delta Quilters Guild

P.O. Box 76  
Brentwood, CA 94513

## CLASS FEE REIMBURSEMENT

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

Pay to the Order of

Member Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

*A Gift of Learning*



**Class taken:**

**Date(s) of Class:**

**Name of Affiliate Member:**

**Total Cost of Class:**

**Class Instructor's signature & date:** *(after completion of class)*

### ***Instructions***

Make sure to have above filled out completely  
Attach receipt from class payment

Treasurer Use:

Amount Paid: \_\_\_\_\_ Check #: \_\_\_\_\_ Date Paid: \_\_\_\_\_