



**POCONO MOUNTAIN QUILTERS' GUILD**  
**P.O. Box 1465**  
**East Stroudsburg, PA 18301**

**PAYMENT/REIMBURSEMENT REQUEST**

*Please use a separate form for each payee and attach all receipts for purchased items.  
Please staple your receipts on the upper right hand corner*

PAID TO	DESCRIPTION	AMOUNT

TOTAL \_\_\_\_\_

Submitted by: \_\_\_\_\_

To be paid to: \_\_\_\_\_

Reimbursed on: \_\_\_\_\_

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

**For Treasurer:**

Date enter in Excel: \_\_\_\_\_

By: \_\_\_\_\_

Print Name