WARRANT #_____

GFWC / CFWC Orange District
EXPENSE VOUCHER – WARRANT

DATE: _____ AMOUNT DUE: $_____

MAKE CHECK PAYABLE TO: _____

MAIL OR GIVE CHECK TO: _____

_____

_____

REQUESTED BY: _____

ACCOUNT (Budget Category)	EXPLANATION (All bills must be Itemized)	AMOUNT
APPROVED BY:		

DIRECTOR OF FINANCE

CHECK #: _____ DATE PAID: _____ RECEIVED BY: _____