

ART ALLIANCE PAYMENT VOUCHER

PAYABLE TO: _____

MAIL TO: _____

PAYMENT FOR: _____

Amount: _____ Date Requested: _____

COMMITTEE/PROJECT: _____

Approval of CHAIRPERSON: _____

Approved:

_____ or _____
AA Treasurer AA President

Please note: All expenditures must be authorized by the committee chairperson AND the AA President or the AA Treasurer.

Please attach all original receipts, bills and/or invoices to a copy of this voucher and submit them to the Art Alliance treasurer.

Please **DO NOT** submit a voucher directly to personnel at RAM.

Check #: _____

Date Paid: _____

Amount: _____

Paid to: _____

Budget Category: _____