

FALLBROOK QUILT GUILD

Quilt Show Reimbursement Request Form

Date: \_\_\_\_\_ Requested by: \_\_\_\_\_

Check Payable to: \_\_\_\_\_ Authorized by: \_\_\_\_\_

Amount *	Brief Description of Expense
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	<b>TOTAL DUE</b>

Category: Please check the appropriate box

- |   |   |
|---|---|
| <input type="checkbox"/> Accounting                     | <input type="checkbox"/> Photography            |
| <input type="checkbox"/> Admissions                     | <input type="checkbox"/> Program and Quilt Tags |
| <input type="checkbox"/> Advertising and Signage        | <input type="checkbox"/> Publicity              |
| <input type="checkbox"/> Auction                        | <input type="checkbox"/> Quilt Collection       |
| <input type="checkbox"/> Country Store                  | <input type="checkbox"/> Quilt Show Layout      |
| <input type="checkbox"/> Demonstrations and White Glove | <input type="checkbox"/> Refreshments           |
| <input type="checkbox"/> Design Advertising Materials   | <input type="checkbox"/> Rental Supplies        |
| <input type="checkbox"/> Entry Forms                    | <input type="checkbox"/> Set-Up Take-Down       |
| <input type="checkbox"/> Facility Rental                | <input type="checkbox"/> Supplies and Clean Up  |
| <input type="checkbox"/> Food Booth                     | <input type="checkbox"/> Viewer's Choice Awards |
| <input type="checkbox"/> Memorial Quilts                |   |

\*Please attach all receipts. Thanks!

Date Paid: _____
Amount: _____
Check No. _____
Issued by: _____