

Attach invoice copies here
in back

Authorization to pay invoice

Committee: _____

(chair signature)

(date)

Used for: _____
(project/event)

Amount to be paid:

\$ _____

Chairperson, send to:

Rough and Tumble Historical Association
P.O. Box 56
PARKESBURG, PA 19365

Purchased by:

90

Instructions:

- 1 Fill out & sign the front of this form
- 2 Attach receipts (or an explanation)
- 3 Place in window envelope with address showing

Please turn in expenses within 30 days of occurrence. Later reimbursement requests may result in 4 weeks delay.

Send to Committee chairperson:

_____	Name
_____	Address
_____	City, State

Receipt from:

\$ Amount

date

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total (amount on front)