

GWTA WA CHAPTER "A" PAYMENT/REIMBURSEMENT VOUCHER

Amount: \$ \_\_\_\_\_ Make check payable to: \_\_\_\_\_

Please provide the reason for payment or reimbursement:

\_\_\_\_\_  
\_\_\_\_\_

Today's Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

**APPROVED:**

Date: \_\_\_\_\_

\_\_\_\_\_  
Chapter Director

**Please attach copies of any receipts or documentation.**