WEST SOUND QUILTERS
PROOF OF PURCHASE CERTIFICATION

Date: _____

Total Claim: $_____

Items: _____$_____
_____$_____
_____$_____

Make Checks Payable to: (PLEASE PRINT)
_____

Mail Check to: _____
Address: _____
_____

Signature Board Member: _____
Signature Board Member: _____

I, the undersigned, do hereby certify that the materials have been furnished and for the services rendered as described herein and that the claim is a just, due and unpaid obligation against West Sound Quilters.

Signature of WSQ Guild Member_____

Phone #_____

ATTACH RECEIPT

Treasurer Only
Check #_____
Date of Issue_____

Budget Item
___APNQ Membership
___Administration
___Bus Trip
___Challenge
___Community Quilts
___December Party
___Door Prizes
___Equipment
___Insurance
___Library
___Member Directory
___Memorials
___Name Tags/Pins
___Newsletter
___Programs
___Quilt Show 2008
___Raffle Quilt 2008
___Rent
___Retreats
___T-Shirts
___Workshops & Classes
___Non Budget Item (must be Okayed by Board)