

The Summit County Rotary Charitable Fund

PO Box 4401 Frisco, CO 80443

PAYMENT REQUEST VOUCHER

PAYEE: _____

ADDRESS: _____

TOTAL AMOUNT: _____

COMMITTEE CHAIR PERSON APPROVAL: _____

DATE: _____

FUNDRAISER / PROJECT: _____

SUB-ACCOUNT (if applicable): _____

ATTACHED INVOICES: _____

**NOTE: No payment will be made unless invoices or receipts
are attached and have the signed approval of the Lead Committee Chairperson.**