

**Greater Houston Coin Club, Inc.
Third Party Check Voucher**

Payee Name _____ Date _____

Address _____ Amount _____

City _____ State _____ ZIP _____

Description of reason for payment:

Budget Categories:

(Please provide a breakdown of budget categories with amounts where appropriate)

*******Note: If the Treasurer is to mail the check, the person requesting the payment must provide the envelop with the appropriate address and a copy of the invoice or coupon that should accompany the payment**

Person requesting payment _____ Signature _____

President's Signature _____ Date _____

Treasurer's Signature _____ Date _____

Treasurer's notes _____

Receipt Attached: Yes _____ No _____

Date Paid _____ Check Number _____

Date Entered into GHCC's Accounting Books _____