

Check # \_\_\_\_\_

## Grant & Donation Payment Form

Grantee: \_\_\_\_\_

Contact Person / Representative: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Event / Committee: \_\_\_\_\_

Description / In Payment for: \_\_\_\_\_

Total Amount Due: \$ \_\_\_\_\_

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### For Treasurer's Use Only

Check made payable to: \_\_\_\_\_

Check #: \_\_\_\_\_ Check Amount: \_\_\_\_\_

Date Issued: \_\_\_\_\_ Date Mailed: \_\_\_\_\_

Account / Line Item debited: \_\_\_\_\_

Treasurer's Signature: \_\_\_\_\_

Comments: \_\_\_\_\_