MASSACHUSETTS STATE GRANGE PAYMENT VOUCHER

Check payable to:	Name:			
	Address:			
City, State, Zip:				
For the month of	Date of this bill	Date of this bill		
Date	Description of Expense	Amount		
	Total Amount	\$		

If voucher is being submitted by a Committee Member or Deputy then voucher must be approved by (signed and dated) by their Committee Director or their General Deputy:

Forward Payment Voucher to the State President for Approval

This section for Mass State Grange	e President & Executive Committee Use Only	
President	:	Approved Amount:
Sign & Date:		
Executive Committee Auditor		
Sign & Date:		\$
Budget Line Assigned:		