

HINDU SOCIETY OF NORTH CAROLINA
309 Aviation Parkway
Morrisville, NC 27560
Phone (919) 481-2574

Date: _____

Voucher No: _____

Check Number: _____

Date: _____

Date	Description	Category/Committee	Amount

Total: **\$**

Please make the Check in the name of: _____

Claim Submitted By: _____ **Paid By:** _____

Committee/ BOD: _____ **Dated:** _____

Approved BY: _____

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