



NEWFOUNDLAND CLUB OF NORTHERN CALIFORNIA

Voucher

Date _____

Income

Expense

Pay to the order of _____

Mailing address _____

City _____

State _____

Zip _____

Date	Account #	Event	Description	Amount

Per NCNC Financial Policy, expense items without receipts must not total more than \$20.00. For expenses relating to a contract, a copy of the contract must be attached.

Total

--

The above items are authorized for payment from or deposit to the account I control.

Authorization by Working Dog Event Chairperson, Committee Chairperson or Officer:

Print name: _____

Signature: _____

Date: _____

Account Numbers

- | | | | | |
|-----------------------|--------|------------------------------|--------|---------------------|
| 01 Administration | 30DE-1 | Draft Test Event #1 (Spring) | 30WE-1 | Water Test Event #1 |
| 03 Banking | 30DE-2 | Draft Test Event #2 (Fall) | 30WE-2 | Water Test Event #2 |
| 04 Website | 30D-S | Draft Seminars | 30WE-3 | Water Test Event #3 |
| 06 Insurance | 30H | Merchandise Sales | 30W-S | Water Seminars |
| 07 Newf's Paper | 30M | Equipment Maintenance | | |
| 08 Philanthropy | | | | |
| 09 Membership | | | | |
| 10 Education | | | | |
| 14 Ways & Means | | | | |
| 15 Club Awards | | | | |
| 16 Meetings & Picnics | | | | |
| 21 Bench Decoration | | | | |
| 22 Supported Entry | | | | |
| 23 Holiday Party | | | | |
| 24 Awards Banquet | | | | |
| 28 Sunshine Committee | | | | |
| 34 National Specialty | | | | |
| 35 Regional | | | | |

Treasurer's Comments:

Treasurer's Records
Date
Check #
Deposit Amount

Voucher - rev. 01/22/2017 ; KB

Remit original voucher with signatures to the Treasurer. For Working Dog items, send a copy to the Working Dog Chairperson.