



**Father Bernard Harding Council #12180  
Knights of Columbus**

# Voucher Request

Date:

Pay To:

Amount (submit Receipt):

Budget Item:	Church	Council
	Community	Family
	Youth	Communications
	Other	

Sponsor:

Supporting Information:  
/ Reason for Payment:

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Grand Knight: \_\_\_\_\_

Financial Secretary: \_\_\_\_\_

Trustee: \_\_\_\_\_

Treasurer: \_\_\_\_\_

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Check #: \_\_\_\_\_ Voucher #: \_\_\_\_\_