Center for Social Change, Inc.

SAVE

PRINT

# CHECK RECEIPTS STATEMENT FOR INDIVIDUALS

| Individual Name | | Coordinator | | ALU | |
|---|---|---|---|---|---|
| | | | | | |
| Vendor Name | | Date of Purchase | | Check # | |

| Item Description | Size | Color | Quantity | Price |
|---|---|---|---|---|
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| | | Taxes | | |
| | | Receipt Grand Total | | |

Updated: July/2017