

STATEMENT  
RECEIVED Y\_\_\_ N\_\_\_

**JASPER ACTIVITY FUND VOUCHER**

**CLUB:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**AUTHORIZED BY:** \_\_\_\_\_

**INVOICE ATTACHED:** Yes \_\_\_\_\_ No \_\_\_\_\_

**AMOUNT:** \_\_\_\_\_

**TO:** \_\_\_\_\_

**FOR:** \_\_\_\_\_

\_\_\_\_\_  
**SUPERINTENDENT'S AUTHORIZATION**

\_\_\_\_\_  
**DATE**

PAID \_\_\_\_\_  
DATE \_\_\_\_\_  
CHECK # \_\_\_\_\_