BEDFORD FRIENDSHIP QUILT GUILD Income / Expense Report				
Name	Date			
Circle One: Income Expense				
Description/Purpose		Amount		
	TOTAL			
Please attach RECEIPTS.				
Any expense over \$200 requires board approval.				
For reimbursement by return mail, please enclose a self-addressed stamped of Mail to: BFQG - Treasurer - 122 Alexander Dr., Manchester NH 03109	envelope.			
	check#			
	check/deposit date			
BEDFORD FRIENDSHIP QUII Income / Expense Report	LT GUILD			
Name	Date			
Circle One: Income Expense				
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Name			Date	
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Mail to: BFQG - 1	reasurer - 1	.22 Alexander Dr., Manche	ster NH 03109	
				check#
			check/depo	sit date