



South Carolina Elks Association Voucher



Date: Committee: Amount to be paid:

Lodge: Receipts Attached: Yes No

Expense Account Number:

Payee Name: Email:

Payee Address: City: Zip:

Social Security Number to issue 1099 (For Bands, Prize Winners only)

-----Use Section Below for Deposits-----

Amount to be deposited: Function to be credited:

If funds are for Perpetual Trust Pin please fill in the following:

Donor Name Lodge:

Donor Address: City: Zip:

Received By:

Submitted by signature: Office:

Approved by Signature: Office:

Approved by Signature: Office:

SCEA Secretary
Fred Thompson
1711 Highway 17 S
Unit 823
Surfside Beach, SC 29575
703-217-1603

SCEA CT Secretary
Kenneth A Martin
2508 Moss Tree Court
Rock Hill, SC 29730
803-493-1780

*****Official Use Only*****

Check #: Check Date:
