

Knights of Columbus

Corpus Christi Assembly 2810 P. G. Box 2084 Flagler Beach, FL 32136-2084

Receipt for Payment Voucher		er Date:	
TO:	Brian Taylor, FC	From:	
	bftkofc1@gmail.com	Telephone:	
Pay To:	To: Name: Address: City, State, Zip:		
	Description:		Item Amount
Item #1			
Item #2			
Item #3			
Item #4			
Item #5			
	Please Attach Receip	ts Total:	\$
Event/Reason			
Date Received:			
Date Entered In Supreme System To Print Payment Voucher:			
Trustee Approval Sign and Date:			