



### IMPREST RECEIPT FORM

Date: \_\_\_\_\_, 20\_\_\_\_

RECEIVED from \_\_\_\_\_ Imprest Account

the sum of \_\_\_\_\_ dollars \_\_\_\_\_ cents

for \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Witness to mark of payee where necessary: \_\_\_\_\_

\$ \_\_\_\_\_ :



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