

KMTA Payment Warrant

<input checked="" type="checkbox"/> Program/Event (check below)	To request a payment, mail (or email) this form to: Sally Camp, KMTA Treasurer 2536 N Wycoff Ave, Bremerton WA 98312 sallyannc7@comcast.net	
<input type="checkbox"/> Accountant	Your name:	
<input type="checkbox"/> Advertising	Date:	
<input type="checkbox"/> Benefit Concert	Address:	
<input type="checkbox"/> Carnival		
<input type="checkbox"/> Christmas at the Mall	email:	
<input type="checkbox"/> Community Concert		
<input type="checkbox"/> Benefit Recital	Item to be paid:	Amount:
<input type="checkbox"/> Monster Concert		
<input type="checkbox"/> Competitions	Payee:	
<input type="checkbox"/> Donations	Address:	
<input type="checkbox"/> WSMTA		
<input type="checkbox"/> MTNA		
<input type="checkbox"/> Symphony	Item to be paid:	Amount:
<input type="checkbox"/> Other:		
<input type="checkbox"/> KYMF	Payee:	
<input type="checkbox"/> Leadership Seminar	Address:	
<input type="checkbox"/> MAP		
<input type="checkbox"/> MLP	Item to be paid:	Amount:
<input type="checkbox"/> Meeting/Programs		
<input type="checkbox"/> Membership	Payee:	
<input type="checkbox"/> Nadean Clark Memorial	Address:	
<input type="checkbox"/> Publicity		
<input type="checkbox"/> Senior Celebration	Item to be paid:	Amount:
<input type="checkbox"/> Spotlight Series		
<input type="checkbox"/> Sunshine/Recognition	Payee:	
<input type="checkbox"/> Technology/Website	Address:	
<input type="checkbox"/> Other		