REGIONAL AECG

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| ACQUITTAL OF PETTY CASH FUNDS |
| REGIONAL AECG |  |
| PRESIDENT NAME  |  | TREASURER NAME |  |
| CONTACT NUMBER |  | CONTACT NUMBER  |  |
|  DATE  | DESCRIPTION | AMOUNT | TRAVEL | STATIONERY | POSTAGE | PHOTOCOPY | OTHER | TOTAL |
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| TOTALS |  |  |  |  |  |  |  |

**Checklist** Receipts attached: □ Minutes attached: □ Endorsed: □ President’s Signatures: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_