BELLINGHAM AT HOME RECEIPT FORM

Please fill this out (in print) when you carry out requests that involve receiving funds from a member to purchase groceries or other items. Both you and the member must sign this form.

Date:
AMOUNT RECEIVED:
Member's Signature:
Volunteer's Signature:
TOTAL COST OF ITEMS PURCHASED:
CHANGE GIVEN TO MEMBER:
Member's Signature:
Volunteer's Signature: