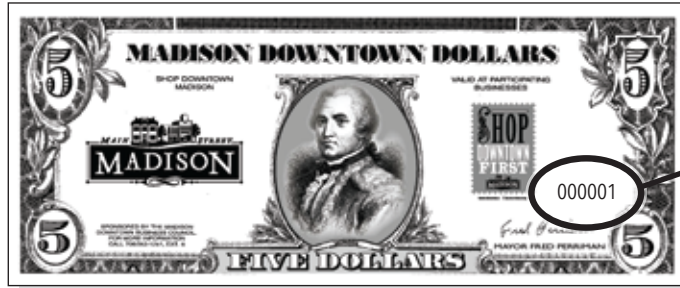




City of Madison
Downtown Dollar Reimbursement Form

Complete This Form And Return To Main Street With Downtown Dollars

Date: _____



Serial Number

000001

Merchant Information

Name Of Business: _____

Cash Reimbursed To (Print Name): _____

Amount Of Downtown Dollars: \$ _____

Please List Downtown Dollar Serial Numbers:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

For Office Use Only

Vendor No. 35336 Payable To: City of Madison Downtown Petty Cash Fund

Voucher # _____ GL# 100 - 7550 - 523306

Received By: _____ Date: _____

Authorized By: _____ Date: _____