## **Paid-Out Form**

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Store #:	Date:	Store #:	Date:
Vendor/Business Paid		Vendor/Business Paid	
Merchandise Bought/ Services Performed		Merchandise Bought/ Services Performed	
Total Dollar Amount \$		Total Dollar Amount \$	
Employee Printed Name		Employee Printed Name	
Employee Signature		Employee Signature	
Approval By: (circle one)  District Manager or Larry Kibbe		Approval By: (circle one)  District Manager or Larry Kibbe	
*Attach the receipt to the back of this form.		*Attach the receipt to the back	of this form.
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	Out Form  Date:	Paid-C	Out Form  Date:
Paid-C	Date:	Store #:	
Paid-C		Store #:	
Paid-C Store #: Vendor/Business Paid Merchandise Bought/	Date:	Store #:  Vendor/Business Paid  Merchandise Bought/	
Paid-C Store #:  Vendor/Business Paid  Merchandise Bought/ Services Performed	Date:	Vendor/Business Paid  Merchandise Bought/ Services Performed  Total Dollar Amount \$	
Paid-C Store #:  Vendor/Business Paid  Merchandise Bought/ Services Performed  Total Dollar Amount \$	Date:	Vendor/Business Paid  Merchandise Bought/ Services Performed  Total Dollar Amount \$	Date:
Paid-C Store #:  Vendor/Business Paid  Merchandise Bought/ Services Performed  Total Dollar Amount \$ Employees Printed Name  Employee Signature  Approval By: (circle one)	Date:	Store #:  Vendor/Business Paid  Merchandise Bought/ Services Performed  Total Dollar Amount \$  Employees Printed Name  Employee Signature  Approval By: (circle one)	Date: