	Disabled American Veterans Auxiliary
	Warrant / Voucher / Check Request
#	_ # 20
Date	(Must Agree with Check # Issued)
	The Treasurer of:
Amount	State Department or Unit & Number (whichever is applicable)
Payable to:	Shall Issue Check To:
	In The Amount Of:
	For:
For	
	Commander Adjutant/Finance Chairman
	Must be signed by Adjutant/Finance Chairman and co-signed by the Commander.
	Disabled American Veterans Auxiliary
	Warrant / Voucher / Check Request
#	·
Date	"
	The Treasurer of:
Amount	The Treasurer of: State Department or Unit & Number (whichever is applicable)
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	Warrant / Voucher / Check Request
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Date	— # 20
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