OiR Ayr Monthly Payment Form – Appendix A2

Activity: _____ Location: _____ Month: _____

Leader: _____

		Weekly Payments				
		Date	Date	Date	Date	Date
Name	OIR No					
Payments received:						

Total for month: **£_____**

Hall Hire per session: **£ _____**

Received with thanks:_____ **Date:_____**