## Milford United Methodist Church Milford, New Hampshire REQUEST FOR PAYMENT

| Date:                    |
|--------------------------|
| To: Treasurer            |
| From:                    |
| For:                     |
|                          |
| <del></del> _            |
|                          |
|                          |
| Amount of Request: \$    |
| Pay to:                  |
|                          |
|                          |
| Account to be charged:   |
| Approved:                |
| (Program Area)           |
| Approved:(Finance Chair) |
| Check No:                |
| Date Paid:               |