

First Parish in Milton
Check Request Form

Date:	_____
Payee:	_____
Address:	_____

Amount:	_____
Submitted by:	_____
Signature: (REQUIRED)	_____

Charge to Account (circle one):

OFFICE REQUEST

General Supplies
 Copier
 Computer/Web
 Phone
 Postage
 Miscellaneous
 Minister's Discretionary Fund
 Sunday Collections Distribution

COMMITTEE REQUEST

Parish
 Buildings and Grounds
 Flowers
 Caring
 Finance ABD
 Finance
 Hospitality
 Membership
 Music
 Religious Education
 Social Action
 Technology
 Worship
 YAC

PROFESSIONAL ALLOWANCE

Minister
 RE Director
 Music Director
 Operations Mgr.
 Youth Advisors

OTHER

Contributions
 Dues
 Major Repairs

<u>Mileage reimbursement</u>	
Miles	
\$ per mile	x \$0.485
	\$

Reason for request (Please be specific):
 Church Debit Card Purchase (no check required)

Please attach all bills, receipts, etc. to this request.