

PRESBYTERY OF SUSQUEHANNA VALLEY

12 Whitney Way
Bainbridge, NY 13733

Date: _____

REQUEST FOR CHECK

Payable to _____ Tax ID _____

Address _____

For _____

Amount \$ _____ Committee to be Charged _____

Fund _____ Account to be charged _____ Subaccount _____

Signature of Requestor _____ Disbursement Date _____

Chairperson/Authorized Signature _____

All requests over \$1,000 must have committee minutes substantiating request attached.

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