Minneapolis Friends Meeting

Request for Payment

Please com	plete items tha	at apply	to your re	quest and attac	h receipts	s, if any. Tha	nk you!
1. Name (on check)				Date submitted			
2. Address	(to send check	k to)					
3. Budget category # Line item				Committee clerk's OK			
4. Payment	t/reimbursem	ent for:					
5. Total am	ount of check	\$	Н	ourly rate \$	Т	otal hours_	
Date	# of hours		Date	# of hours	Treasurer's use		use
						Check #	
						Amount	
						Date Paid	
Please com	plete items tha	at apply	-	for Payment quest and attac	h receipts	s, if any. Tha	ank you!
				request and attach receipts, if any. Thank you! Date submitted			
				Comm			
5. Total amount of check \$							
Date	# of hours		Date	# of hours		Treasurer's	use
						Check #	
						Amount	
						Date Paid	
							1