

MT LEBANON UNITED PRESBYTERIAN CHURCH  
VOUCHER REQUEST

PAY TO: \_\_\_\_\_

VENDOR NO: \_\_\_\_\_

Mailbox Of: \_\_\_\_\_

Or Mail To: \_\_\_\_\_

ACCOUNT	AMOUNT	
_____	\$ _____	
_____	\$ _____	
_____	\$ _____	
_____	\$ _____	
_____	\$ _____	TOTAL \$ _____

Reason for paying voucher: \_\_\_\_\_

Special instructions: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ Date: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ Date: \_\_\_\_\_

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