

Presbytery of Northern New York
8739 US Highway 11, Potsdam, NY 13673 / 315-265-7640

Check Request

Date: _____ **Fund:** _____

Payable to: _____

Address _____

Purpose/Reference: _____

Mileage	Miles Traveled	Rate Per Mile	Account No.	Amount

Other Payments	Account No.	Amount

Total Check Amount: _____ **\$** _____

Requested by: _____ **Approved by:** _____

Office Use:

Check No. _____

Date of Check _____