

First Congregational Church of Natick
Payment Voucher

DATE: _____

Payment Authorization (check one)

Payment authorization for reimbursement of expenses to yourself.

Payment authorization of invoice(s) [attach] to a company, group, or individual other than yourself.

Payment authorization *without invoice* to a company, group, or individual other than yourself.

Description of Service(s) Received/Procured

Documentation of Expenses (Attach copies of invoice, receipts, explanations, etc., to this form).

Payment Instructions (Please note any special instructions for the treasurer with regard to amounts payable).

Pay To: _____ Amount \$ _____
Pay To: _____ Amount \$ _____
Pay To: _____ Amount \$ _____

____ Treasurer to leave check in _____ box in: Office Vestry

____ Treasurer to mail check to vendor as noted on the attached invoice

____ Treasurer to mail check to (include name & address): _____

Account Information (Please note which Church Committee(s)/expense account(s) should be debited).

Expense Account _____ Amount \$ _____

Expense Account _____ Amount \$ _____

Expense Account _____ Amount \$ _____

Authorization (The Chairperson or designee of each expense account to be debited must sign to authorize payment).

Name _____ Committee _____

Name _____ Committee _____

Name _____ Committee _____

Attach this form to invoice/receipts/explanation and put in Treasurer's box in Church Office.
If you scan documentation, you may submit to treasurer@fccnatick.org.