

New England Yearly Meeting of Friends Disbursement Request

Mail completed request to
New England Yearly Meeting
Accounts Manager
901 Pleasant St
Worcester, MA 01602

date of request: _____

amount requested: _____

invoice or receipt date: _____

***Please be sure to attach,
or photocopy on the reverse of this form, all
relevant receipts or other documentation.***

From: *name and address*

Account name: _____
(Specify committee or project)

Account number: _____ (if known) Class number: _____ (if known)

Send to (if different than payee):

Pay To: _____

Address: _____

Description of the expense items: _____

Authorizing Signature: _____ **Phone:** _____
(clerk of committee for whom the request is being made)

