

North Central California Presbytery

Check Request/Payment Voucher Form

Date of Request: _____ **Date Needed:** _____ **Mail:** _____ **Hold:** _____

Make Check Payable To: _____

Mailing Address: _____

City: _____ Zip Code: _____

Requested by:	<hr/>
	Signature
Title:	<hr/>
	Printed Name
Approved by:	<hr/>
	Signature
Title:	<hr/>
	Printed Name

*****Please attach any supporting receipts or vouchers to this request*****

Payments will not be processed without the approval by the Committee Chair and Staff Leader

Payments will not be processed without Account Numbers being provided

Payment requests that are not reimbursements need to include a completed W-9

Please send approved requests to Presbytery Treasurer treasurer@nccpresby.org (rev. 1/4/26)