

**DISBURSEMENT REQUEST FORM
CENTRAL NEW YORK BAPTIST ASSOCIATION**

Type of Request:

- (pink) _____ Advance Payment (or order)
- (yellow) _____ Payment from Invoice or Statement
- (blue) _____ Reimbursement
- (green) _____ Payroll
- (tan) _____ Other

Requested By: _____ Date _____

Pay To _____ Amount _____

From Line Item	Amount	For
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Special Instructions:

Approved By: _____ Date _____

Check #: _____ Date: _____