

LAKEVILLE UNITED CHURCH OF CHRIST

Corner of Route 18 & Precinct Street

Mailing address 1 Precinct Street Lakeville, MA. 02347

Church 508-947-4979

Minister
Rev. Greta MacRae
1 Precinct Street
Lakeville, MA. 02347
Office 508-947-2441

EXPENSE VOUCHER FORM

To the Treasurer. Treasurer.	e issue a check for the following.	•	
Please issue a check in t	the amount of	to:	
	Name:		
• .	Mailing address:	. 2	
	ginal receipt or documentation re	,	
Account or committee to	be charged:		
Board or committee appr	roval by:		
Name printed:			
Signature:	Date:		
	TREASURER'S USE ONLY		
Date paid:	Check #:		
Amount:	Account charge	Account charged:	