Highland United Methodist Church
680 W. Livingston Rd. Highland, MI 48357
p-248.887.1311 ~ f-248.889.4475 ~ www.humc.us

PERSONAL PERSONAL PERSONAL PERSONAL PERSONAL PERSONAL PERSONAL PERSONAL PERSONAL

PERSONAL CHECK REQUEST

Date _____

Payee Name _____
Payee Address _____
_____
_____

Charge to account _____ Amount _____

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Authorized by: _____
If same person is Payee, please have one of the following countersign:

- *HUMC staff -or-*
- *your committee -or-*
- *Finance committee*

Description *(please attach original receipts)*	Quantity	Unit Price	Total Price

Total _____