

\_\_\_\_\_ UNITED  
HONPA HONGWANJI BWA

REQUEST FOR PAYMENT

Payable to: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_ Amount: \_\_\_\_\_

Requested by: \_\_\_\_\_ Approved by: \_\_\_\_\_

Please attach receipt/s \_\_\_\_\_

For Finance Committee use only:

Check # \_\_\_\_\_ Date issued: \_\_\_\_\_ Account charged to: \_\_\_\_\_

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