

TRUSTEES OF TRUST FUNDS
Post Office Box 310
Milton, New Hampshire 03851

Voucher for Disbursement from a Capital Reserve Fund ("CRF") or Private Trust Fund

Date: _____

Board, Department or Individual requesting disbursement:

Name of the CRF or Private Trust Fund from which the disbursement is requested:

Purpose of the disbursement: _____

Amount requested: _____

Date of vote authorizing the disbursement request: _____

Check should be made payable to: _____

Instructions for issuance of check: _____

Requested by: _____

Authorized Signature Title

Please attach applicable contract, receipts and/or invoices substantiating the disbursement request, along with the minutes of the meeting of the Board authorizing the expenditure.

If the Trustees are being asked to directly pay the vendor the Trustees require prior to any disbursement to the vendor a copy of a completed IRS Form W-9 from the vendor.

Vouchers may be mailed to the Trustees of Trust Funds at Post Office Box 310, Milton, New Hampshire 03851, faxed to Karen Brown, Chairman, Trustees of Trust Funds, at (603) 652-4120, or e-mailed to Karen.brown.1258@gmail.com