



### PAYMENT FORM

Date: \_\_\_\_\_

Payment Amount: \_\_\_\_\_

Payment is for the following activity: \_\_\_\_\_

\_\_\_\_\_

PLEASE REMEMBER TO ATTACH RECEIPT(S) OR SUPPORTING DOCUMENTATION TO THIS FORM		
Make check payable to:	Name	
Send check to:	Address	
Send to the attention of (if different):		
Payment authorized by:	Name	
	NHLA Title	

----- [ Forward to NHLA Treasurer ] -----

Pay from:

Bank/Broker Name	Bank/Broker Acct #	Fund Name	Acct. Classification	Amount

NHLA Treasurer: \_\_\_\_\_

Date: \_\_\_\_\_

Treasurer's Notes: \_\_\_\_\_

----- [ Forward to Accountant ] -----

Accountant's Notes: