



THE CHURCH OF THE TRANSFIGURATION

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Outreach Committee Funds Disbursement Approval

The following grant was approved by the Outreach Committee, and is approved by the committee for payment.

Today's Date _____ Meeting Date _____

Total Grant Amount _____

Organization Name _____

Organization Mailing Address _____

Name of Contact Person _____

Telephone Number of Contact Person _____

E-Mail of Contact Person _____

Timing for Disbursement of Funds _____
(e.g., "immediately", or "four quarterly payments beginning January 2009")

Check memo _____
(e.g., "new refrigerator", "summer mission trip", or "scholarship fund")

Special Instructions _____

Signature _____

Please attach any cover letter(s) or other materials that should accompany the check(s), along with relevant supporting documents.