

**Deliver to: David Watts**

Check number \_\_\_\_\_  
Date \_\_\_\_\_

**MMEA Request for Payment**

Check to be made payable to : \_\_\_\_\_  
SS# or EIN: \_\_\_\_\_  
Address to send Payment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Amount of Payment: \$ \_\_\_\_\_

Please charge to: (please indicate which account)

- |                                      |   |
|--------------------------------------|---|
| _____ Executive Board                | _____ All Sate Auditions                    |
| _____ All State Festival             | _____ Conference                            |
| _____ Large Group Festival           | _____ Solo and Ensemble                     |
| _____ Jazz All State Auditions       | _____ State Jazz Festival – HS Instrumental |
| _____ Jazz All State Festival        | _____ State Jazz festival –Vocal            |
| _____ GM Fall Workshop               | _____ Bulletin                              |
| _____ State Jazz Festival – MS Instr |   |
| _____ Other: Specify _____           |   |

**Reason for request/Expense Category**

- Receipt or invoices must be provided for payment.
- **Please refer to your budget for Expense Category**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Person Requesting Payment

\_\_\_\_\_  
Date of request

**Mail, fax or email this form to:**

David Watts  
14 Estes Drive  
Freeport, ME 04032

[david\\_watts@coconetme.org](mailto:david_watts@coconetme.org)  
(H) 207-865-9771  
(W) 207-865-4607, ext 605  
Fax (207) 865-2900  
[www.mainemmea.org](http://www.mainemmea.org)