



PULASKI HEIGHTS UMC FOUNDATION

DISTRIBUTION REQUEST FROM VILLINES DONOR-ADVISED FUND

FROM (Staff member, lay leader, or church group): _____

Amount requested _____
_____ Partial Distribution _____ Full Distribution

How funds will be used _____

(Please use the back of form if more space is needed.)

Signature and title of person making request

Date

TWO SIGNATURES REQUIRED: For all amounts, signature of the donor and the Executive Director of PHUMC Foundation are required.

Signature of Executive Director – PHUMC Foundation

Date