TOWN OF HUBBARDSTON

**ENCUMBRANCE REQUEST FORM**

**FOR FISCAL YEAR ENDED JUNE 30, 2020**

**TO: KELLI PONTBRIAND, TOWN ACCOUNTANT**

# FROM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DEPARTMENT

**RE: YEAR-END ENCUMBRANCES**

**Please encumber the following for expenses incurred June 30, 2020 or prior for which invoices have not been received by my department/committee but the service/goods have been rendered/received.**

## Appropriation Date To Whom Amount

**Account Ordered Payable Due**

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 **Department Head and/or Committee Members**