

CHECK REQUEST FORM

Check Reimbursement* (attach receipts) Payroll Reimbursement In/Out

Your Name _____ Ministry Name _____ Date _____

Pastor and/or Church Business Coordinator's Approval** _____ GL# _____ Amount \$ _____

Purpose _____ Date Needed _____

Payable to _____

Address _____

City _____ State _____ Zip _____

Mail Check Give Check to _____ Other _____

*All reimbursements need pre-approval before the expense is incurred and reimbursement requests must be submitted with receipts before a check can be issued.

**All Check Requests must receive a Pastor's and/or the Church Business Coordinator's approval before it is submitted to the Finance Office.

FOR FINANCIAL OFFICE USE ONLY

Approved/Date/Initials _____

Date Posted _____ Initials _____

Denied/Date/Initials _____

G/L Account _____

Fed ID# and/or SS# _____

Notes _____

Rev. 5/06

CHECK REQUEST FORM

Check Reimbursement* (attach receipts) Payroll Reimbursement In/Out

Your Name _____ Ministry Name _____ Date _____

Pastor and/or Church Business Coordinator's Approval** _____ GL# _____ Amount \$ _____

Purpose _____ Date Needed _____

Payable to _____

Address _____

City _____ State _____ Zip _____

Mail Check Give Check to _____ Other _____

*All reimbursements need pre-approval before the expense is incurred and reimbursement requests must be submitted with receipts before a check can be issued.

**All Check Requests must receive a Pastor's and/or the Church Business Coordinator's approval before it is submitted to the Finance Office.

FOR FINANCIAL OFFICE USE ONLY

Approved/Date/Initials _____

Date Posted _____ Initials _____

Denied/Date/Initials _____

G/L Account _____

Fed ID# and/or SS# _____

Notes _____

Rev. 5/06