GENERAL

Reimbursement/Check Request

Person Requesting Check: _____

Phone: _____ Today's Date: _____

Ministry Requesting Check:_____

Check needed by: _____

Check Payable to: _____

Purpose of Check: Activity Deposit Reimburse (circle one) Purchase

_____ I will pick up from the church office _____ Please mail check to the address below

_____

_____

Acct.	Description of Reimbursement	Amount	Class

**** PLEASE ATTACH RECEIPTS ****

GRAND TOTAL _____

Approved for payment: _____ **DATE:** _____

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