



Check Request

This Reimbursement Request must have an approved Expenditure Request attached, along with receipts for the money spent. This allows us to track and plan the usage of God's money. If you spend money without first submitting an Expenditure Request, you will not be reimbursed.

If you would like to be reimbursed in the same week that you submit this Reimbursement Request, please submit it to the Financial Office no later than Tuesday at Noon.

Today's Date:

Your Name:

Expenditure #:

Email Address:

Ministry Name:

Telephone:

Amount spent:

* Budgeted Non-Budgeted

Description of How Funds are to be used:

How you would like Reimbursement to be Made:

Payee:	<input type="text"/>
Address:	<input type="text"/>
Address 2:	<input type="text"/>
City/ST/Zip:	<input type="text"/>
In Memo:	<input type="text"/>

Once the Check is written:

- Mail to payee above
- Interoffice to:
- Other:

For Accounting Use Only: