

CHECK REQUEST / PAYMENT FORM



Form Instructions: Use this form to provide check payment information for authorized events, speakers, facility purchases and reimbursements. This form must be completed by a Ministry Chairperson, Director or Administrative Assistant in full before forwarding to the office or it will be returned. The check request should be submitted at least two weeks before the check is needed. Expedited checks will be considered on a case by case basis. The Pastor contacts all guest speakers. Check requests for honorariums and musicians are to be completed by Church Administrator / Pastor. The Church Secretary will prepare all thank you letters for guest churches and speakers. **SUPPORTING RECEIPTS MUST BE RECEIVED WITHIN TEN DAYS OF THE EVENT.**

I. Completed by Requestor		Date	
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Payee		Social Security Number or EIN Number	
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Payee Address (Street, City, State & Zip)		Check Requested by: Name, Title	
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Chairperson		Date		Treasurer		Date	
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Name of Ministry		Funds Applied to: (Event, etc.)	
Check Amount		Date Check Needed by:	

Is this a budgeted expense?	<input type="checkbox"/> Yes	Budgeted Amount? (Give form to bookkeeper)	
	<input type="checkbox"/> No	Discuss with Pastor (If approved, requires Pastor's initials)	

II. Bookkeeper's Review (To be Completed by Bookkeeper)		Date Received	
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Availability of Funds in Budget	<input type="checkbox"/> Yes	<i>If yes, Give form to Trustees for approval</i>
	<input type="checkbox"/> No	<i>If no, return form to requestor</i>

Bookkeeper Authorization		Date Approved	
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III. Trustee Approval (To be Completed by Trustee)		Date Received	
Chairperson's Approval		Date Approved	

VI. Check Creation (To be Completed by Bookkeeper)		Date Received	
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Voucher Number		Check Number		Date Check Ready	
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