

Payment Request

Category : Please, check below.

General

Designated

Guest Speaker

Date : _____

Ministry Team : _____

Ministry Team Leader : _____

Signature : _____

Steering Committee : _____

Signature : _____

Pastor of Department : _____

Signature : _____

Budget Code	Purchase Date	Item	Detailed Purpose	Amount	Remarks
					*Within budget () Out of budget ()

* If the expense is for gift card or lunch/dinner meeting, please write the name of the gift card recipients and meeting attendees.

*On detailed purpose, please, provide when you purchase, where you purchase and what you use for (e.g. water for discovery class)

Payable to (Name) : _____

Address : _____

Accounting

By Cash : _____

By Check : Check # _____

Date : _____

Confirmed with data input person : _____

Confirmed with finance department : _____



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