# **SDA CHURCH**

CHU	RCH
CK#:	

## **CHECK REQUEST FORM**

Date of Request

Please Make Check Out To:				Date of Request:		
Name: Please Print						
RECORD OF RECEIPTS						
	Date	Store/Vendor	Items Purchased	Account to Charge	Amount	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
1			•	Total Amount Requested	\$	

#### Requester's Signature: \_\_\_\_\_

(Required)

To be filled out by treasurer:

#### Date of Church Payment:

### **Directions:**

- 1) Complete the top of this form, listing each receipt on a separate line.
- 2) Attach all original receipts by stapling them to the back of this form.

#### **General Guidelines for Reimbursements:**

- 1) Church purchases should not be co-mingled with personal purchases on the same receipt.
- Have the cashier ring up personal purchases on one receipt and church purchases on another.
- 2) To be eligible for reimbursement, original receipts must be turned in within 30 days of the date on the receipt.
- 3) Purchaser must write the purpose, department, and/or project on each receipt
- 4) IMPORTANT: For all restaurant receipts [including fast food or take-out]: Write the name(s) of those who ate. If a large group was fed, list the name of the group followed by the number that were fed. EXAMPLE: "Youth Group; 3 sponsors & 6 kids."