

# MONTGOMERY UNITED METHODIST CHURCH REQUEST FOR PAYMENT FORM

**Check one of the following:**

Check Request

Reimbursement Request

Church Credit Card Payment

Bank of America

Sam's/Other

Payment to Vendor with Terms

**PART 1 (complete for Check Request or Reimbursement Request):**

Check Payable to (Name): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

**PART 2 (complete for all payment types):**

Vendor \_\_\_\_\_

Amount of Purchase \_\_\_\_\_

Date of Purchase \_\_\_\_\_

Description of Purchase: \_\_\_\_\_

Please attach original invoice, bill or receipt, and Pre-Approval Purchase form (for expenditures over \$500.)

BUDGET ACCOUNT \_\_\_\_\_

I affirm the above referenced purchase relates entirely to Montgomery United Methodist Church ministries and business.

Signed by: \_\_\_\_\_ Date \_\_\_\_\_

Approved by: \_\_\_\_\_ Date \_\_\_\_\_  
(Ministry Head/Church Administrator/Treasurer)

**For Accounting Use Only**

Posted to Budget/Traced to Credit Card Stmt

\_\_\_\_\_  
Initials & Date