

ATTACH RECEIPT TO BACK OF THE FORM IN THE RIGHT-HAND CORNER

Bethany Primitive Baptist Church

Reimbursement/Payment Request Form

DATE: _____ REQUESTED BY: _____ (PLEASE PRINT)

REQUESTER'S SIGNATURE: _____

TYPE OF ACTION:

- Automatic Bank Draft
- Advance Check Request
- Debit Card
- Lifeway Credit
- Payment Request
- Reimbursement/ Credit-To

MINISTRY (PLEASE CHECK MINISTRY BOX BELOW):

<input type="checkbox"/> Abex <input type="checkbox"/> Benevolent <input type="checkbox"/> Bereavement <input type="checkbox"/> Brotherhood Ministry <input type="checkbox"/> Christian Education <input type="checkbox"/> Church Custodians <input type="checkbox"/> Colorama <input type="checkbox"/> Deacons/Deaconess <small>(Communion/Baptism Supplies, Gloves)</small>	<input type="checkbox"/> Electric-Utilities <input type="checkbox"/> Evangelism Ministry <input type="checkbox"/> Facility Operations <input type="checkbox"/> Finance Ministry <input type="checkbox"/> Food/Kitchen Ministry <input type="checkbox"/> Gifts of Love <input type="checkbox"/> Insurance (Church Building) <input type="checkbox"/> Lawn Care	<input type="checkbox"/> MIA Young Adults <input type="checkbox"/> Music Ministry <input type="checkbox"/> Nursery <input type="checkbox"/> Office/Copier Supplies <input type="checkbox"/> Pastor's Care (robe cleaning) <input type="checkbox"/> Pest Control <input type="checkbox"/> Praise Dance/Drama <input type="checkbox"/> Propane Gas	<input type="checkbox"/> Salaries <input type="checkbox"/> Telephone/Internet <input type="checkbox"/> Trustee Board <input type="checkbox"/> Usher Ministry <input type="checkbox"/> Van Ministry <input type="checkbox"/> Women's Auxiliary <input type="checkbox"/> Youth Ministry <input type="checkbox"/> _____
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PURPOSE OF PURCHASE: _____

CHECK PAYABLE TO: _____

DATE OF PURCHASE/ REQUEST	DESCRIPTION OF ITEM(S)/PAYMENT REQUEST	AMOUNT

TOTAL:

For Official Use

APPROVED BY: _____ CHECK ISSUE DATE: _____

RECIPIENT OF CHECK: _____ CHECK # _____