



1300 Seaside Road SW, Sunset Beach, NC 28468
910-579-5753

REQUEST FOR PAYMENT FORM

- Reimbursement (of personal funds spent)
- Invoice to be Paid
- Credit Card Charge (*please indicate which Visa was used*)

_____ Kristen/Church Office (6501) _____ Matt (3866) _____ Stefanie (9570)

Date: _____ Payee: _____

Amount: \$ _____ Signature: _____

My signature indicates that I incurred this expense on behalf of the church.

Expense Explanation. (Please attach all receipts): _____

General Ledger Account to Be Charged: _____

NOTE: Your request cannot be processed without listing an account number. Please refer to the partial account listing on the reverse side for assistance.

APPROVALS: All payment requests must be approved before they can be processed. Incomplete forms will delay processing.

Committee Approving this Expense: _____
Approved By: _____ <div style="display: flex; justify-content: space-between;"> Committee Chair or Designee - Printed Name Committee Chair or Designee - Signature </div>

NOTE: If a committee chair is requesting reimbursement, please have the vice chair or a designee sign for approval.