

Check #: _____

Greater Huntsville Church

Reimbursement & Payment Request Form (2018 version)

Please submit to: Charlie Brown or mail to 1307 Teenajo Dr. Huntsville, AL 35803
All Payment Requests should be submitted within 60 days of the expense

Payable To: _____

Address: _____

Phone: _____

Amount: _____

Date Needed: _____

Distribution: Mail to Above Address

Hold at Office

Please Check Category of Expense

- Minister Business
- Mission Team Promotion
- Conference & Seminars
- Campus Ministry Expenses
- Promote Mission Team to Churches
- Minister & Servant Gifts
- Ministry Education
- Facilities
- Benevolence
- Professional Fees & Services
- Printing & Copying
- Insurance
- Supplies
- Kingdom Kids & Youth Ministry
- Miscellaneous

Purpose of Check: _____

Receipts?: Yes No *(Please staple all receipts behind this form)*

If No Receipt, Explain: _____

Requested By (sign): _____ Date: _____

Approved By (sign): _____ Date: _____

-----**For Accounting Use Only**-----

Approved By: _____ Reference No.: _____

Account: _____ Date Received: _____

Account: _____

Account: _____ Date Posted: _____

Comments: _____