

## FINANCE REQUEST FORM

Pay To       Account         Address if necessary       Total Bills       00         Amount       Total Coin       I         Account       Total Checks       I         Account       TOTAL       I         Church Related Purpose       Reason       Reason         Requested by       Signature       Date       Date         Committee Chairperson Approval       Signature       Date       Date	Reimburse	ement (Receipts	Credit						
Amount Total Coin Image: Coin   Amount Total Checks Image: Coin   Account Total Checks Image: Coin   Church Related Purpose TOTAL Image: Coin   Requested by Signature Date Name   Committee Signature Date Date	Рау То						Account		
Amount       Total Checks       Image: Church Related Purpose         Church Related Purpose       Signature       Date       Reason         Requested by       Signature       Date       Date	Address if necessary						Total Bills	(	00
Account   Account   Church Related Purpose   Requested by   Signature   Date   Name   Committee   Signature   Date							Total Coin		
Church Related Purpose     TOTAL       Requested by     Signature       Committee Chairperson     Signature         Date     Date	Amount						Total Checks		
Requested by     Signature     Date     Name       Committee Chairperson     Signature     Date     Date	Account						TOTAL		
Committee     Signature     Date       Chairperson     Date	Church Related Purpose						Reason		
Chairperson	Requested by Signature			Date		Name			
	Chairperson	Signature			Date		Date		
Office Use Only.Date ReceivedInitialReceipts AttachedFollow upCheck NumberCheck Date	Use		Initial	Receipts A	ttached	Follow up	Check Number	Check Date	12-07



Use Only.

## 雙城華人基督教會 Twin City Chinese Christian Church

## FINANCE REQUEST FORM

Reimburs	ement (Receipts	Credit					
Рау То						Account	
Address if necessary						Total Bills	00
						Total Coins	
Amount						Total Checks	
Account						TOTAL	
Church Related P	urpose					Reason	•
Requested by		Signature		Date		Name	
Committee Chairperson Approval	Signature			Date		Date	
Office Date Red	ceived	Initial	Rece	eipts Attached	Follow up	Check Number	Check Date