

Check #: \_\_\_\_\_

# Greater Huntsville Church

## Reimbursement & Payment Request Form

*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

Other - \_\_\_\_\_

**Please Check Category of Expense**

- Minister Business
- Mission Team Promotion
- Facilities
- Professional Fees
- Printing & Copying
- Church Insurance
- General Supplies
- Youth Ministry & Kingdom Kids
- Website Hosting & Domain
- Special Events
- Benevolence
- Miscellaneous

Purpose of Check: \_\_\_\_\_

\_\_\_\_\_

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

If No, Explain: \_\_\_\_\_

Requested By: \_\_\_\_\_ Date: \_\_\_\_\_

Approved By  
(Signature): \_\_\_\_\_ Date: \_\_\_\_\_

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

Approved By: \_\_\_\_\_ Reference No.: \_\_\_\_\_

Account: \_\_\_\_\_ Date Received: \_\_\_\_\_

Account: \_\_\_\_\_

Account: \_\_\_\_\_ Date Posted: \_\_\_\_\_

Comments: \_\_\_\_\_