

GDS CHECK REQUEST

Includes items charged on church's account at stores, items charged to individual's credit card and cash purchases.

Please attach a copy of all tickets/invoices/receipts etc.

TOTAL AMOUNT for REIMBURSEMENT/or TOTAL AMOUNT CHARGED \$ _____

PAYABLE TO: _____
(If you used the church's charge account, put the name of the store. You don't have to include address for church charge accts.)

ADDRESS: _____

Project Name: _____

Project code _____

PAYMENT FOR: _____	Amount _____	For office use A/C # _____
i.e. refreshments, project supplies, tools, etc.		
_____	Amount _____	For office use A/C# _____
_____	Amount _____	For office use A/C # _____
_____	Amount _____	For office use A/C # _____

Check to be mailed ()
Picked up () Requested By: _____ Date: _____

You should receive your check within 14 days.

Instructions

GDS Check Request must be filled out for each purchase/reimbursement
(include items charged at a store or items charged to an individual's credit card or cash purchases)

Complete information: Amount (total amount of purchase)
 Payable To/Address
 (either person being reimbursed or store where church charge account was used)
 Project Name/Project Code
 Payment For (this would be the item that has been purchased)

If one request includes 2 purchases, list items and cost for that item (total with tax)

Also mark if check is to be mailed or if someone is picking it up. If someone other than person completing request is to pick up check, please provide a name.

A copy of sales receipt, invoice, etc must be attached to check request form.

Do not complete information in boxes noted **For Office Use**

Sign and date form.

For Office Use: Approved _____ Date _____ 1099 _____ Full Payment _____