

MOUNT HERMON AFRICAN METHODIST EPISCOPAL CHURCH

Check Request Form

Instructions

- Please print legibly –we can't pay if we can't read it!
- Only one (1) check per form
- Payment will be made from forms with original authorized signatures only
- Please attach original receipts or invoices (no copies)
- Invoices must include dates of service
- Incomplete forms will be returned to the submitter
- Check requests are processed in 7-10 business days

Amount Requested \$ _____ Date Needed: _____ Event Date: _____

Description (Event Name & Purpose of Expenditure) _____

SECTION 1. Payment Type (Check One)

- Payment to Vendor [Attach receipts, invoices, or contracts **originals only**]
- Reimbursement [All original receipts, invoices, and unused cash **MUST** be submitted within 5 days]
- Cash Advance

Check should be: Held for pick-up at church office Mail to Payee

Check should be mailed: With attached documents, please specify: _____

SECTION 2. Check payable to (Company or Person's name): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

SECTION 3. Person Requesting the Check

Name: _____ Phone: _____

Organization / Ministry Name: _____

Officer Approval

Signature: _____ Name: _____ Title: _____

(Only the Organization President/Treasurer /Financial Secretary are authorized to sign check request forms)

****OFFICERS MAY NOT APPROVE THEIR OWN REIMBURSEMENT REQUESTS****

Mount Hermon Accounting Office use only below this line

Date Issued:	Check #:	Amount: \$	Date entered:	Initials:
Funding Source <input type="checkbox"/> Organization Account Account Balance Before This Transaction: \$ _____				
<input type="checkbox"/> Budget Expense Account # _____				
Pastor's Approval _____				Date _____
Treasurer's Signature: _____				Date _____

Check Request Procedures

- A **Check Request Form** must be completed when submitting an invoice for church-related purchases or services. All authorizing signatures are required before submitting the Check Request form to the Accounting Office.
- Use a **Check Request Form** for church expense reimbursements, church travel advances, and any items which do not have an invoice.
- If a copy of the invoice needs to be sent with the check, please include an extra copy.
- If you have several invoices for one vendor, staple each invoice with whatever attachments you have. The total page should be on top if you have a multiple page invoice. These invoices can then be clipped or banded together.
- When requesting a check via a **Check Request Form**, please supply complete information. Use the payee's full name (*i.e. Susan Rollins, not just Sue Rollins*).
- If the **Check Request Form** is for any type of labor or related service and the supplier is not a corporation or 'approved' vendor of Mount Hermon, the social security number or federal identification number needs to be supplied, along with an IRS W-9 form. Staff persons who provide labor or service outside their regular positions must be paid through Payroll, not Accounts Payable.
- Please remember that Mount Hermon is exempt from state sales tax. Purchases should not include sales tax. The church office can supply you with a copy of our State of Florida tax-exempt certificate to be used for any taxable purchase.
- Church Travel Advances need to be accounted for within 60 days of the church event. This is an IRS requirement. This means receipts and/or cash totaling the amount of the advance need to be submitted to the Accounting Office.
- **Checks are issued each Thursday.** Checks held for pick up are available after 2:00 p.m. in the Church Office. All other checks are mailed Thursday afternoon. If checks marked to hold for pick-up are in the office after two (2) weeks, they are mailed to the address on the check.
- All Invoices and check requests should be **in the Church Office or Accounts Payable box** by 5:00 p.m. on Thursday to be included in the next week's checks.