

TRINITY UNITED METHODIST CHURCH
Request for Payment or Reimbursement Form

Please fill-in this form if one of the following applies:

A. You order or purchase an item and it is billed to Trinity United Methodist Church. Attach the receipt(s) or order acknowledgement to the form and check **PAYMENT**.

B. You paid for an item and request reimbursement. You must attach a receipt to the form and check **REIMBURSEMENT**.

C. You need an advance check to pay for an item to be purchased. Check **ADVANCE** and after the purchase turn-in a receipt to be attached to the form.

- Purchase Order # _____ (This number is given by Church Treasurer)
- Request (Please check one):

PAYMENT

REIMBURSEMENT

ADVANCE

- How did or will you pay for item(s) (Please check one):

TUMC Check

TUMC Credit Card

TUMC Debit Card

TUMC Food City Acct

TUMC Sam's Acct

TUMC Kroger Acct

Personal Check

Personal Credit/Debit Card

Cash

Other - If checked other, please explain _____

- Amount: \$ _____ Where purchased _____ Date of purchase: _____

- Description of Purchase: _____

- Purpose of Purchase: _____

- Was purchase approved by Committee/Ministry Chairperson? Yes or No

- Name (Please Print): _____

- Signature: _____