

St. Andrew's Lutheran Church of Ames

Request for Check

INSTRUCTIONS

To receive reimbursement for any expense, complete all sections of this form and attach receipts for the expenses. All forms must be signed by a committee chair. If you do not come in to sign on a timely basis, the Council President or Vice-President may be required to sign. The back of this form shows the committee's and line items for the current year's budget. If this form is not complete, you may not receive reimbursement or payment may be delayed.

STEP 1. Pre-approval signature by Treasurer of purchases/vouchers \$250 or more is required.

STEP 2. Purchase and Reimbursement Information

BANK ACCOUNT (check only ONE bank account):

- General Fund (Operating Budget & budgeted TMT, PRMT)
- Missions Bank Account (non-budget TMT, PRMT)
- Rental Property Bank Account
- EMF Bank Account (internally written)

Date: _____

Request for: (check only ONE)

- Check to vendor or reimbursement
- Credit Card Payment - VISA

Is the voucher total \$250 or more? (check one)

- Yes (Treasurer's signature required)
- No

Check payable to: _____

Address: _____
(send to) _____

Business Purpose (i.e. youth bonfire, worship supplies, etc.): _____

Date	Description	Committee	Account #	Expense Amount
mm/dd/yy	describe your purchase here	your committee name	see back	\$

(Debit expense)

(Credit to cash - 1100) **Total to pay** \$**

****Total of \$250 or greater requires Treasurer's Signature**

STEP 3. Signatures (email or phone approvals acceptable)

Treasurer signature: _____ **Date:** _____ **Email:** _____
Pre-approval required by Treasurer BEFORE a purchase of \$250 or more is made. (In special cases when the Treasurer is unavailable, the President may sign.)

Requesting signature: _____ **Date:** _____ **Email:** _____
Person to be reimbursed or person requesting a vendor/person to be paid

Authorizing signature: _____ **Date:** _____ **Email:** _____
Committee Chair for committee expenses. President, Vice-President, or Treasurer if Requester is Committee Chair or this is a non-committee expense

STEP 4. Attached receipts

STEP 5. Make a copy for your committee records

OFFICE USE ONLY: Send to Schnurr for Check(EMF checks are written in-house)

Check prepared & recorded: _____ Date: _____ Check # _____
Schnurr & Associates