



Payment / Reimbursement Request Form

Date: _____ Amount: _____

Check for reimbursement should be paid to: **OR** Purchase was made with:

Name: _____

Address: _____

- Church credit card
- Slaughter's credit account
- Other _____

Fund Information

Line item this expense/reimbursement should be charged to (see back for codes):

If the expense includes multiple line items, please list each with amounts to be charged per line item. ***Check here if to be paid from restricted funds

Purpose or Description of Expense

Authorization

Your Name _____

Authorized Signature _____

*Please attach receipts or invoice/bill to this form and place it in the Financial Administrator's mailbox in the church office. All 1099 vendors must have W-9 on file before payment can be made. **Thank you!***

For Office Use

Date Paid: _____ Paid from: Restricted Funds Account _____

Check # _____ General Funds Account _____

Authorized Signature _____



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Expense Accounts

- 7000 · Ministries
 - 7020 · Church Curriculum
 - 7030 · Music
 - 7040 · Worship
 - 7050 · Fellowship
- 7100 · Designated Ministries
 - 7101 · Bereavement
 - 7102 · Building
 - 7103 · Camp
 - 7104 · Children
 - 7105 · Discipleship
 - 7106 · Friday Night Food & Fun
 - 7107 · Holston Home for Children
 - 7108 · Memorial
 - 7109 · Music
 - 7110 · Outreach
 - 7111 · Pastor's Discretionary Fund
 - 7112 · Plenty!
 - 7113 · Scholarship
 - 7114 · Student
 - 7115 · UMCOR
 - 7116 · United Methodist Men
 - 7117 · Worship
- 8000 · Operations
 - 8010 · Church Building Maintenance
 - 8030 · Parsonage Maintenance
 - 8040 · Church Grounds Maintenance
 - 8050 · Custodial Supplies
 - 8060 · Office Supplies
 - 8061 · Printing and Copying
 - 8062 · Postage and Shipping
 - 8063 · Software
 - 8090 · Telephone/Internet
 - 8110 · Insurance
 - 8120 · Communications
 - 8130 · Annual Conference