

Hudson Memorial Presbyterian Church

Check Requests | Expense Reimbursement

Requests are processed and mailed or distributed on Thursdays.

DIRECTIONS:

- Fill out form completely (missing information may result in delays)
- Include backup documentation (receipt/order form/invoice)
- Place the completed form, along with all backup documentation, in the Business Manager box.

Questions/concerns... email ehairston@hmpc.org

CHECK ONE OF THE FOLLOWING:

Check Request

Expense Reimbursement Request

DATE: _____ NAME OF REQUESTER: _____

NAME ON CHECK (IF DIFFERENT THAN REQUESTER): _____

PLACE CHECK IN MY STAFF MAILBOX – **OR** –

SEND CHECK TO THIS ADDRESS: _____

Charge Expenses as follows:

Account Name & Number	Description of Item	Amount
TOTAL AMOUNT REQUESTED:		\$

Staff / Ministry Team Leader Authorizing Payment:

Name: _____ Signature: _____