



ST. JOHN AME

"Sharing The Word Serving The People"

SAINT JOHN AFRICAN METHODIST EPISCOPAL CHURCH

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PRE-AUTHORIZATION AND PAYMENT REQUEST FORM

STEP 1: PRE-AUTHORIZATION REQUEST (Do not skip this step.)

All vouchers must be approved prior to purchases. Instructions: Complete Step 1 of this form and place in the Payment Request Inbox in the Church Office. Please allow 5-7 business days for processing.

Date:

Projected Expense Amount:

Name of Requestor:

Board/Ministry:

Board/Ministry Leader Concurrence
(Print & Sign):

Purpose:

Summary of Items to be Purchased:

FINANCE COMMITTEE

Do not write in this box

Decision:

Budget Code:

Approved Expense Amount:

Charge to Account:

Signature:

Date:

STEP 2: PAYMENT REQUEST (Step 1 must be completed and approved prior to Step 2.)

Reimbursements will be processed up to the approved amount that was spent by the requestor.)

Instructions: After Step 1 is completed and approved, please submit this form along with your original receipts. You will need to place this form in the Payment Request Inbox in the Church Office. Please allow 5-7 business days for processing.

Date:

Actual Expense Amount:

Name of Requestor:

Make Check Payable To:

Requestor's Signature:

By signing this form, I certify that all funds expended were void of excess and necessary for the support and advancement of the ministry. I further certify that I have acted as a trusted agent of the church and exercised good stewardship in the expenditure of funds to the greatest extent possible for the duties of which I am charged.

Do not write in this box

FINANCE COMMITTEE

Approval:

Date:

Check Number:

Budget Code:

Reimbursed Amount: