

PEOPLES CONGREGATIONAL UNITED CHURCH OF CHRIST

PURCHASE/PAYMENT REQUEST VOUCHER

ORGANIZATION/AUTHORIZED SIGNATURE REQUIRED BELOW

AMOUNT: \$ _____ DUE DATE: _____

PLEASE NOTE: COPY OF ORIGINAL INVOICE/RECEIPT MUST BE ATTACHED

MAKE CHECK PAYABLE TO: _____

Will Pick-up at Church: Yes _____ No _____

ADDRESS: _____

PURPOSE: _____

REQUESTED BY: _____ DATE: _____

(Authorized Signature)

(Requestor: Do not write below this line)

APPROVED BY: _____ DATE: _____

(Treasurer/Asst. Treasurer Signature)

BANK ACCOUNT NUMBER: _____

GL Account Number: _____ Amount: \$ _____

GL Account Number: _____ Amount: \$ _____

Date Paid: _____ Amount Paid: \$ _____ Check #: _____

Approved & Submitted by: _____ DATE: _____

(Financial Secretary/Asst. Financial Secretary Signature)