

Wittenberg Evangelical Lutheran Church

Post Office Box 345 Granite Quarry, North Carolina 28072 Telephone 704-279-4505

Request for Payment

Date of Request: _____ **Amount:** _____

Pay to: *(Name of Individual or Vendor)* _____

Address: *(Address to which check is to be mailed)* _____

Charge to: *(Account or Committee)* _____

Detailed Explanation of Expense: _____

All payment requests and reimbursements must have two signatures for processing. Please sign both your FIRST and LAST name below. If the committee chair is requesting payment a second signature *(from a committee member or Council President)* is still required. Thank you.

Payment Requested By *(Please print FIRST and LAST name):* _____

Signature: _____

Committee Chairman/Representative Signature: _____

INSTRUCTIONS: Please attach receipt, contract, or invoice to this form and forward to the Church Secretary. *If the original application/contract must be sent in, a copy must be made and attached to this form for auditing purposes.* The secretary will log the request and submit it to the Treasurer. *(This form is not required for utilities or invoices for vendors with which the church has open accounts.)*

***Reimbursements will not be paid without attached receipts, contracts, or invoices describing the items purchased and/or amounts. This form must have two signatures (requested by and representative).**

For Treasurer's Use Only:

Check Number: _____

Date of Payment: _____

Updated: 8/29/2024