

BERGEN CHRISTIAN TESTIMONY CHURCH

CHECK REQUISITION

Payable To: _____
(Name & Address in English)

Amount: _____.

Purpose: _____

Special Instruction: _____

Requested By: _____
(print 中文名/ English)

Signature: _____

Date: _____ **Phone#:** _____

e-Mail: _____

Accounting Category: please mark ONE

☐ Sunday School / Library: Alan, 張璞 Paul, Emmanuel

☐ Mission: 忠人 John, 國機 William, 凌峰 Brian

☐ Fellowship / Sharing: 文革 Walter, 希妍 Celia

☐ Maintenance/Equipment: 林甫 Fu Lin, Henry

☐ Kitchen: 劉峻 Jun Liu

☐ Finance: 國機 William, 何光宇 Kwang Ho

☐ Other _____ (account name)

Approved By: _____
(print 中文名/ English) ☐ e-Mail approval attached

Signature: _____
☐ Approved by Elder/Deacon meeting
☐ Additional approval: ____ elder(s)

Elder Signature: _____
☐ e-Mail approval attached

Elder Signature: _____
☐ e-Mail approval attached

CHECK REQUISITION PROCEDURES

- (1) Complete the Check Requisition Form and submit the entire package to the secretary
- (2) Attach all supporting documentation
 - Please review invoices from outside vendors to avoid duplication
 - Please group petty cash receipts by category before submitting for reimbursement
- (3) Obtain approval from your department and get signature from
 - For item less than \$500, or items approved in Elder/Deacon meeting: department head
 - For item more than \$500 but less than \$1,000: department head and one elder
 - For item \$1,000 or more: department head and two elders (urgent request only)
 - Email approval is accepted as signature

DO NOT WRITE BELOW THIS LINE

CHECK #	AMOUNT

Date Paid: ____ / ____ / ____

Check Preparer: _____