Evangelical Chinese Church of South King County

CHECK REQUEST VOUCHER

☐ Pre-Purchase ☐ Reimbursement ☐ 1099

Date: _____

Name: _____ Phone #: _____

Make Check Payable to

Address (Required) : _____

Street *City* *State* *Zip*

☐ Mail to Above Address ☐ Return to me ☐ Give to: _____

Request By: _____ Pre-Approved By: _____

Important: Please attach original itemized receipts

An item over $300 requires pre-approval by the Commission Elder before proceeding

Please submit this no later than the 10th of each month for your last month's expense

Commission: ☐ Membership ☐ Maturity ☐ Ministry ☐ Mission ☐ Magnification

Administrative: ☐ General ☐ Operation ☐ Building/Facility ☐ Personnel

Account Name	Account Code	Cost		Description
		Estimated	Actual	
		-	-	

Reimbursement Approval: _____ Date: _____

Check #: _____