

## Christ Memorial Presbyterian Church --- Request For Payment

Payable To:		Amount:	
Address:		Requested By: <span style="float: right;">Date:</span>	
Address is not needed if on bill		Bill's Due Date:	
For What?:		Approved By:	
<b>Would you like to donate these expenses?</b>			

**If you do not have a TAX EXEMPT card, please contact the Church Office.**

<p style="text-align: center;"><b>CHRISTIAN EDUCATION</b></p> <p><input type="checkbox"/> Committee Expenses</p> <p><input type="checkbox"/> Adult Christian Education</p> <p><input type="checkbox"/> VBS</p> <p><input type="checkbox"/> Youth Christian Education</p> <p><input type="checkbox"/> GIFT</p> <p><input type="checkbox"/> LOGOS High School Conf.</p> <p><input type="checkbox"/> _____</p>	<p style="text-align: center;"><b>FINANCE</b></p> <p><input type="checkbox"/> Committee Expense</p> <p><input type="checkbox"/> Session Expenses</p> <p><input type="checkbox"/> _____</p>	<p style="text-align: center;"><b>PERSONNEL</b></p> <p><input type="checkbox"/> Committee Expense</p> <p><input type="checkbox"/> Automobile Mileage</p> <p><input type="checkbox"/> Prof Exp – Minister</p> <p><input type="checkbox"/> Continuing Ed</p> <p><input type="checkbox"/> _____</p>
<p style="text-align: center;"><b>PROPERTY</b></p> <p><input type="checkbox"/> Church Cleaning</p> <p><input type="checkbox"/> Bldg. Maint. &amp; Equip.</p> <p><input type="checkbox"/> Maint. Contracts</p> <p><input type="checkbox"/> Lawn Care</p> <p><input type="checkbox"/> Snow Removal</p> <p><input type="checkbox"/> _____</p>	<p style="text-align: center;"><b>MISSION</b></p> <p><input type="checkbox"/> Committee Expense</p> <p><input type="checkbox"/> Local Missions</p> <p><input type="checkbox"/> National/Global Mission</p> <p><input type="checkbox"/> _____</p>	<p style="text-align: center;"><b>WORSHIP</b></p> <p><input type="checkbox"/> Committee Expense</p> <p><input type="checkbox"/> Choirs</p> <p><input type="checkbox"/> Flowers</p> <p><input type="checkbox"/> Equipment Maintenance</p> <p><input type="checkbox"/> Worship support</p> <p><input type="checkbox"/> Pulpit Supply</p> <p><input type="checkbox"/> Musicians</p> <p><input type="checkbox"/> _____</p>
<p style="text-align: center;"><b>HOSPITALITY AND MEMBERSHIP</b></p> <p><input type="checkbox"/> Hospitality and Membership</p>	<p style="text-align: center;"><b>FELLOWSHIP</b></p> <p><input type="checkbox"/> Fellowship</p>	<p style="text-align: center;"><b>STEWARDSHIP</b></p> <p><input type="checkbox"/> Stewardship</p>
<p style="text-align: center;"><b>CARE AND WELLNESS</b></p> <p><input type="checkbox"/> Care and Wellness</p> <p><input type="checkbox"/> Prayer Shawl Ministry</p>	<p style="text-align: center;"><b>COMMUNICATIONS</b></p> <p><input type="checkbox"/> Telephone &amp; Internet</p> <p><input type="checkbox"/> Copier</p> <p><input type="checkbox"/> Office supplies</p> <p><input type="checkbox"/> IT support</p> <p><input type="checkbox"/> Communications</p> <p><input type="checkbox"/> _____</p>	<p style="text-align: center;"><b>OTHER</b></p> <p><input type="checkbox"/> _____</p>

**send this form along with receipts in pdf form or picture to [accounting@cmpcusa.org](mailto:accounting@cmpcusa.org).**