



Pennsylvania Baptist State Convention

Rev. Dr. Melvin R. Baber, President

Rev. Dr. W. Gregory Fleming, Vice President-at-Large

CHECK REQUEST / REIMBURSEMENT FORM

(Complete requested information - incomplete information will delay check processing)

Request Date: _____

	Mail
	Office Pick-Up
	Return to Ministry Leader

Date Payment Needed: _____

Requestor: _____



HONORARIUM



REIMBURSEMENT *(receipt/bill copy must be attached)



FINANCIAL REQUEST

	PARENT BODY	MINISTRY CODE:
	MINISTRY: _____	
<i>*ministry requests must be approved by Ministry Leader</i>		
CHECK PAYABLE TO:	AMOUNT REQUEST:	
MAILING ADDRESS (if applicable): *<i>(PLEASE INCLUDE ADDRESS IF CHECK NEEDS TO BE MAILED)</i> _____ _____	BUDGETED? YES / NO	

Purpose or use of above funds- _____

~ IF FUNDS ARE REQUESTED FOR PAYMENT TO ANOTHER COMPANY OR MEMBER, FORMS MUST BE SUBMITTED AT LEAST 14 BUSINESS DAYS PRIOR TO DATE NEEDED.

~ REIMBURSEMENT CHECKS WILL BE ISSUED WITHIN 10-14 BUSINESS DAYS OF RECEIPT OF APPROVED FORM.

APPROVALS

Ministry President Signature: _____

Ministry President Printed Name: _____

Date: _____ Phone Contact: _____

Rev. Dr. Melvin R. Baber, President

Rev. Dr. W. Gregory Fleming, Vice President-at-Large

MAIL REQUEST TO:

D. Pamela Mosley

% PA BAPTIST STATE CONVENTION
300 Lebanon Street, Steelton, PA 17113-1826

email: pbsctreasurer5@gmail.com ° website: www.thepbsc.org ° (717) 439-3657

FOR OFFICE USE ONLY:

Date Received: _____

Date Paid: _____

Check No./Receipt No: _____ Budgeted: Yes / No

PBSC Treasurer: _____ Financial Secretary Initials: _____

Comments: _____