



First Presbyterian Church
302 West Whitner Street ~ Anderson, SC 29624

Check Request / Expense Voucher Form

Date of the Request: _____

Person(s) Making the Request (Print): _____

Address (Street, City, State, Zip Code): _____

Reason for the Request / Justification: _____

Person(s), Group, or Organization to make the Check Payable to: _____

Amount of the Check: _____

Special Instructions: _____

Signature of Person(s) Requesting: _____

NOTE: Be sure to attach all Matching Receipts to this form – keep a copy of this form and your receipts for your records.

Church Staff Only: Account(s) to Code the Expense:

Account Name	Account Number
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(U S A)

_____	_____
_____	_____
_____	_____

Approved for Payment – Signature: _____

Check Generated and Distributed: _____

Signature

Date

Return this form to the Business Administrator
 E-mail: Finance@FPCAndersonSC.com OR Fax: 864-225-2552 OR by Mail.
NOTE: All Receipts must be with this form before the request can be processed.