

Annunciation Greek Orthodox Church Requisition Form

Original receipts must accompany this request for reimbursement, and must be turned in within 90 days of the receipt's date. Copies of receipts from Credit Card Companies or Online Purchases are also acceptable but must contain detailed information on the purchase. Do not submit photo copies. Your request will be returned to you and will delay payment. **No checks will be written for any reason without this form.** Please allow 7-10 business days for the check.

Submitted by (print name): _____ Title: _____

Organization or Event Name: _____

Reason for request: _____

Approved by signature: _____ Date: _____

Print Name: _____ Title: _____

Organization or Event Name: _____

Comments: _____

Requisition must be approved and signed before submitting to Bookkeeper.

To Bookkeeper:

Amount Requested: _____ Date: _____

Check payable to: _____

Check to be (please check one): Mailed OR Picked up at the Church

If picked up, Phone number: _____

Address: _____

City: _____ State: _____ ZIP: _____

Checks will be mailed if not picked up within 2 weeks.

Office Use Only:

Check No: _____

Paid By: _____

Date: _____

Acct Code: _____