



# First United Methodist Church of Farmington Disbursement Form

Request Date: \_\_\_\_\_

Request Type: Check Request

Charge Verification

Requestor Signature: \_\_\_\_\_ Requestor Printed Name: \_\_\_\_\_

Requestor Phone: \_\_\_\_\_ Requestor Email: \_\_\_\_\_

Pay to the order of: \_\_\_\_\_ Due Date: \_\_\_\_\_

Delivery Method: Mail Check  I will pick-up the check  leave it where: \_\_\_\_\_

Address (if different than invoice) \_\_\_\_\_

Amount of Check/Charge: \$ \_\_\_\_\_ (If over \$2000.00 it needs the Treasurer approval as well)

Purpose of Expense: \_\_\_\_\_

Accounts To Draw From (Detail total must equal check/charge total)

Account Number	Account Name	Amount

**Submit Completed and signed form with supporting documents to the CHECK REQUEST folder in the MAIL drawer in the office.**

Account Holder Approval: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Account Holder Phone: \_\_\_\_\_ Account Holder Email: \_\_\_\_\_

**Requests where the Submitter is the Payee or the total amount is over 2000.00 needs Treasurer approval. Place the request in the pending approval folder.**

Treasurer Approval: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_