



# SBMC CHECK/CREDIT CARD REQUEST & RECEIPT TRACKING FORM

**DATE:** \_\_\_\_\_

**TO: SBMC FINANCE DEPARTMENT**

Please Select From The Following List (Anuai List teng pan teal tu).

Check Reimbursement Request

Credit Card Payment Receipt

Debit Card Payment Receipt

Cash Payment Receipt

Account Transfer

**AMOUNT: \$** \_\_\_\_\_

**DEPARTMENT | MINISTRY CATEGORY:**

Building Expenses

Membership Due

Church Activities

Men Ministry

Church Administration

Minister Expenses

Church Mission

Missellaneous

Church School Ministry

Music Ministry

Cleaning

Transportation

Emergency Fund

Women Ministry

Love Gift

Youth Ministry

Media Ministry

**PURPOSE | KOISUNG, BANG ATU ZANGH (Please Attach Receipt | Receipt Attach tu):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUESTED BY:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**APPROVED BY:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**SBMC Finance Team Use Only:**

(If Check Issued, Check Number,  
Transaction ID, Refferance ID)

**Issued/Transaction Date:** \_\_\_\_\_

Updated/Recorded on SBMC Monthly Expense Tracking

**Updated Date:** \_\_\_\_\_

**SBMC Auditor Team Use Only:**

Audit  
Completed

**Date of Audit:** \_\_\_\_\_

**Audited By:** \_\_\_\_\_