

Bethany Evangelical Missionary Church

CHEQUE REQUISITION FORM

Approval (Required): _____

Date: _____

Use this form for all cheque requests and attach supporting invoices/documents.

Cheques will not be issued unless this form is approved by the individual responsible for the budget category. A list of these individuals is available in the church office.

CHEQUE PAYABLE TO: _____

CHEQUE AMOUNT: _____

DETAILS

DESCRIPTION OF EXPENDITURE	AMOUNT	BUDGET ACCOUNT #
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
	<i>total</i>	_____

HST: _____ amount on invoice

GST: 38% of HST amount claim 50% _____

PST: 62% of HST amount claim 82% _____

Comments or notes:

Requested by: _____ Date: _____