

# PAYMENT REQUEST

## Form

The People's Community Baptist Church  
 31 Norwood Road · Silver Spring, Maryland 20905  
 301-384-2601 · (F) 301-989-2242 · www.tpcbc.org  
 Dr. Haywood A. Robinson, III Pastor

Date	Ministry
Reason for Payment Request	
Date Check is Needed	<b>Please submit Payment Request to Accounting 10 days before check is required.</b>

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
TOTAL Requested		

Requestor's Signature	Date
Phone Number	
<div style="display: flex; justify-content: space-between;"> <span>____ - ____ - ____ (Day)</span> <span>____ - ____ - ____ (Evening)</span> </div>	
E-mail Address	
Ministry Director / Authorized Designee	Church Administrator

MAKE CHECK PAYABLE TO:		
Name	Check Status <input type="checkbox"/> Hold <input type="checkbox"/> Mail	
Address		
City	State	Zip

COMMENTS:	FOR ACCOUNTING USE ONLY: LESS THAN \$600 ( ); W9 ( )