

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	Submit Request to Accounting@tpcbc.org at least <u>10 days</u> before check is required.

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
TOTAL Requested		

Requestor's Signature	Date
Phone Number _____ - _____ (Day) _____ - _____ (Evening)	
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 () FOR ACCOUNTING USE ONLY: DEBIT CARD ONLINE () PHONE ()