

Staple Receipts  
Here

**REVOLUTION YOUTH MINISTRIES  
FARMINGTON HILLS CHURCH OF GOD  
CHECK/REIMBURSEMENT REQUEST**



**REQUESTED BY**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

Reason: \_\_\_\_\_

Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**MUST BE SIGNED BY YOUTH PASTOR OR REVOLUTION YOUTH MINISTRIES TREASURER**

- Mail Check to Requestor
- Give Check to Requestor
- Other \_\_\_\_\_

**For Internal Use Only (VERSION 1.2)**

CHECK # \_\_\_\_\_ PAID BY \_\_\_\_\_

DATE PAID \_\_\_\_\_

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