

CREDIT CARD USE REQUEST FORM

Please return the credit card and a copy of this form with your attached receipt(s) to the Church Secretary's mailbox, three days after the request date.

Amount Requested: \$ _____

Card Holder's Name: _____ Date Requested: _____

Ministry: _____ Date Needed: _____

Ministry Account: _____

Explanation of Use: _____

Ministry Chairperson's Signature: _____

Please use the Tax Exemption Form with your purchase, so that the Church is not charged tax on taxable items.

If you have any questions contact _____ at (____) _____.

Official Church Use Only

Church Secretary's Signature: _____

Church Finance Manager's Approval Signature: _____