



Friendship Missionary Baptist Church
 3400 Beatties Ford Road, Charlotte, NC 28216
 Phone: 704-392-0392; Fax: 704-391-5800
 Dr. Clifford A. Jones, Sr., Senior Minister

CASH ADVANCE REQUISITION

DO NOT MAIL CHECK. HOLD FOR PICK-UP BY REQUISITIONER OR PAYEE ONLY.	Acct # (Staff Use Only) <table style="display: inline-table; border: 1px solid black; width: 100px; height: 20px; vertical-align: middle;"> <tr> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> </tr> </table> <table style="display: inline-table; border: 1px solid black; width: 100px; height: 20px; vertical-align: middle; margin-left: 20px;"> <tr> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> </tr> </table>										

Requisition Date: _____

Date Needed _____

Allow fourteen (14) working days

Organization _____

Requestor _____

Requestor's Phone Number _____

DeiVision _____

DeiVision Minister Approval _____

Activity _____ Date of Activity _____

Purpose (Explain Fully) _____

FUNDS TO BE ISSUED VIA CHECK(S) TO THE FOLLOWING PERSON:

Name	Address	Amount
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

IMPORTANT NOTE !

THE PAYEE MUST SUBMIT RECEIPTS TO SUPPORT THE TOTAL AMOUNT OF THIS ADVANCE SPENT ON THE ACTIVITY NOTED ABOVE. ALL REMAINING FUNDS SHOULD BE RETURNED TO THE CHURCH, WITH ABOVE RECEIPTS, **WITHIN ONE MONTH OF THE ADVANCE ISSUANCE**. FAILURE TO COMPLY WITH THIS POLICY WILL MANDATE FMBC ISSUING THE PAYEE A FORM 1099 TO INCLUDE THE CASH TOTAL AS TAXABLE INCOME PER THE INTERNAL REVENUE SERVICE. PLEASE DIRECT ANY QUESTIONS TO JOHN SPANN (EXT 6644) OR SHANA SPICER (6646). THANKS FOR YOUR SUPPORT AND COOPERATION IN ADVANCE.