

First Baptist Church of Mansfield Payment Request Form

(Complete this form for all church expenses and reimbursement requests, attach receipts, and give to the church treasurer.)

Please pay \$ _____.

Date of Request: _____, 20__

to Name: _____

Address: _____

Phone: _____

for Church Budget Category (circle one):

A. Pastoral Ministry

Pastor's Salary, Housing, and Benefits

1. Salary and Housing
2. Health Insurance
3. Retirement (M&M)
4. Social Security Tax Offset

Reimbursed Expenses:

5. Automobile
6. Conference
7. Continuing Education
8. Hospitality
9. Professional Memberships

B. Church Home

1. Church Transportation Service
2. Electricity
3. Heating Fuel
4. Insurance
5. Janitor & Supplies
6. Maintenance
7. Mowing
8. Phone
9. Plow Snow
10. Trash Removal

C. Deacons

1. Deacons' Supplies
2. Pulpit Supply
3. Secret Place Devotionals
4. Volunteer Ministries Task Force

D. Music

1. Choir Director
2. Bells & Instrumental Ensemble
3. Music
4. Organist/Pianist Supply
5. Piano & Organ Maintenance
6. Youth Choir

E. Christian Education

1. Camperships
2. Ch. Ed. Supplies & Resources
3. Curriculum
4. Family Camp Weekend
5. Leadership Training
6. Nursery Attendants
7. Vacation Bible School
8. Youth Programs

F. Committees

1. Church Heritage
2. Communication
3. Flowers
4. Social
5. Stewardship

G. Church Office

1. Church Secretary
2. Office Equipment & Computer
3. Office Supplies, Postage, & Printing

H. General Services

1. Accountant Fees
2. Advertising
3. Bank Deposit Box Rental
4. Convention Expenses
5. Northeast Association Dues

I. Transfers to Investment Accounts

1. Maintenance Contingency Fund
2. Investment

J. Designated Expenses (in/out)

1. (describe below)

Additional explanation of expense, if appropriate:

Authorized by: _____

Date: _____, 20__

Chair of _____ Board/Committee