

CGS Check Request

Date _____

Attach **ORIGINAL** receipts, invoices, or bills to this sheet before submitting.

Outside Vendors: If this is your first CGS Check Request, please submit a **FORM W-9** also.

Autopay/EFT/ACH

Make check payable to _____

Mailing Address _____

Amount _____

Reason for Check / Notes

Please turn over and indicate the line item of expense.

Please check the budget line item to be charged, or fill in **Other** if not found.

| Benevolences | | General & Administrative | |
|---------------------|-----------------------------------|-------------------------------------|-------------------------------------|
| | GWOH | | Administrative Support |
| | Pastor's Discretionary Fund | | Background Checks |
| | SV Pride | | Bishop's Conference Attendance |
| | Safe Car Park (SVSP) | | Hospitality |
| | Shelter Cooking | | Leadership Training |
| | Shelter Cooking New Haven | | Property Taxes / Insurance |
| | SVACG | | Synod Assembly |
| | Synod Support | | Telephone |
| Education | | Personnel | |
| | Adult Education | | Auto Allowance |
| | Children & Youth Ministry | | HR Compliance Resources |
| | Library - Books and Supplies | | Pastor's Continuing Education |
| | | | Pastor's Professional Expenses |
| | Carpet Cleaning | | Workers' Compensation Insurance |
| | Disposal | Worship & Music | |
| | Janitorial Supplies | | Association Fees |
| | Landscaping | | AV Equipment |
| | Maintenance | | Choir Music |
| | Security (Doors/Locks/Keys) | | Guest Musicians / Instruments |
| | Utilities | | Pulpit Supply / Substitute Musician |
| Other | | | Visual Arts |
| | Renewing Spaces (remodel project) | | Worship Music |
| | | | Worship Supplies |

Signature _____

Print Name _____

Please put this sheet and all accompanying paperwork in the Treasurer's mailbox, or email them to treasurer@cgscl.org.