



First Unitarian Church of Omaha

Funds Payment Authorization / Check Request Form

1. **I authorize payment to** (choose one):
- ☐ of the attached invoice (the payee identified on the attached invoice).
- ☐ OR

(include name and full address)

2. **Check distribution:**

- ☐ mail to address on invoice ☐ put in my church mailbox
- ☐ mail to me at _____
- ☐ call me when ready ☐ other _____

3. **Account Information**

(if you don't know the appropriate account number, leave it blank)

Account	Amount	Description of Purchase
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. **Check
Total**

Common Account Numbers

Child RE 6205 Office Supplies 5430
Guest Speaker 6011 Postage 5440
Janitorial Supplies 5670 Pulpit Supplies 6012
Kitchen Supplies 6335 Repairs/Maintenance 5740
Music-Paid Performer 6281 YRUU 6225

5. **Important: Attach your invoices, receipts, and/or other documentation.**

6. **Authorization**

Signature _____ Title _____ Date _____

Instructions:

1. Please complete all six sections.
2. Put routine authorizations in the BOOKKEEPER mailbox at the church. Checks are prepared weekly and may take up to five business days to process. If you need a faster turnaround, please contact accountspayable@firstuomaha.org.
3. Church officers, committee chairs, minister, DRE (or equivalent), and office administrator (or equivalent) may authorize disbursements for expenses associated with their responsibilities.

Administrative Notes

Check Printed By _____ Check No. _____ Date _____