



# Leesburg Presbyterian Church

## Mission & Witness Request Form

Pay to: \_\_\_\_\_  
Indicate NCP for Special Offerings or Middleburg for cashier's check.

Date: \_\_\_\_\_

To the Attn. of: \_\_\_\_\_

Requested by: \_\_\_\_\_

Title: \_\_\_\_\_

Amount: \_\_\_\_\_

(including transfer fees if applicable)

Address

if to be mailed: \_\_\_\_\_

Check to be:

Picked up-by: \_\_\_\_\_

Place in the folder of: \_\_\_\_\_

Check if a letter is to be included with the check.

Mission & Witness			Special Offerings Paid thru National Capital Presbytery		
Acct. #	Mission & Witness	Amount	Acct. #		Amount
601-6100	Mission Giving-United	_____	601-8000	One Great Hour of Sharing	_____
601-6105	National Mission	_____	601-8002	Pentecost Offering	_____
601-6110	Local Mission	_____	601-8002	40% toward local program:	_____
601-6120	International Support	_____	601-8003	Peacemaking Offering	_____
601-6125	Benevolence Outreach	_____	601-8003	40% toward local program:	_____
601-8006	Malawi Support Donations	_____	601-8004	Joy Gift	_____
601-8007	Alternative Christmas Faire	_____	Other	_____	_____
601-8010	Passthru Donations	_____		(Please specify)	(Amount)

Note: Committee chairs should not sign off on reimbursements to themselves. Please have the Finance Committee chair or pastor sign off on these expenses. If you have any questions, please contact Julie Koochagian at [bookkeeper@lpcva.org](mailto:bookkeeper@lpcva.org). Thank You!

Special Instructions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Mission & Witness Committee Chair Approval Signature

\_\_\_\_\_  
Date