



## CHECK REQUEST

Budget Department: \_\_\_\_\_

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

Reimbursement \_\_\_\_\_ Purchase Advance \_\_\_\_\_ Other \_\_\_\_\_ Explain:

\_\_\_\_\_

ACCT #/DESCRIPTION: \_\_\_\_\_ PURPOSE: \_\_\_\_\_ AMT: \$ \_\_\_\_\_

ACCT #/DESCRIPTION: \_\_\_\_\_ PURPOSE: \_\_\_\_\_ AMT: \$ \_\_\_\_\_

ACCT #/DESCRIPTION: \_\_\_\_\_ PURPOSE: \_\_\_\_\_ AMT: \$ \_\_\_\_\_

TOTAL DUE: \$ \_\_\_\_\_

Check to be written to: \_\_\_\_\_

Address if mailed: \_\_\_\_\_  
\_\_\_\_\_

Date check needed by: \_\_\_\_\_

Check needs to be mailed: \_\_\_\_\_

Memo: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Person Requesting Check*

\_\_\_\_\_  
*Pastoral Director/Executive Director*

\_\_\_\_\_  
*Church Treasurer's/Business Administrator's Signature*