

Check Request Form

(Please use one form for each check requested)

Is this a purchase or a reimbursement? (Circle one)

Date check is needed: _____

Name to be posted on check: _____

Amount of Check: _____

What ministry is this check for? _____

ITEMS TO BE PURCHASED (Include all receipts)

1	6
2	7
3	8
4	9
5	10

Signature of person requesting check: _____

Date check is requested: _____

Signature of ministry team leader or an elder: _____

For Treasurer's use only

Check number: _____ Total amount of check: _____

Accounts involved	Amount