

CHECK REQUEST FORM
(USE ONE FORM FOR EACH CHECK NEEDED)

ALL PURCHASES REQUIRE STAFF APPROVAL

PURCHASE **OR** REIMBURSEMENT (Circle One)

DATE CHECK IS NEEDED: _____

TO WHOM CHECK IS TO BE DRAWN:

AMOUNT OF CHECK: \$ _____

WHAT CHURCH ORGANIZATION IS IT FOR:

ITEMS TO BE PURCHASED OF REIMBURSED (Attach receipts)

- | | |
|----|-----|
| 1. | 6. |
| 2. | 7. |
| 3. | 8. |
| 4. | 9. |
| 5. | 10. |

SIGNATURE OF PERSON REQUESTING CHECK: _____

DATE REQUESTED _____

STAFF APPROVAL SIGNATURE

TREASURER'S USE ONLY

CHECK NUMBER: _____ TOTAL AMOUNT OF CHECK: _____

ACCOUNTS REPRESENTED

AMOUNT

\$ _____

\$ _____

\$ _____

\$ _____