

CHECK REQUEST FORM

Today's date: _____ Date Funds Needed: _____

Requested by: _____ Amount: \$ _____

Requestor's phone: _____ Email: _____

Purpose of expense: _____

Make check "Payable to": _____

Address: _____

Indicate Account to Expense:

Organization/Ministry: _____

- Type: Church Expense
 Organization Expense
 Account Transfer

Approval: _____ _____

Select One: Hold for Pick-up by: _____ (or) Mail to above address

NOTE: CHECKS WILL BE PLACED IN THE "CHECK PICK-UP" FOLDER UNLESS OTHERWISE SPECIFIED.