



Check Request Form

Person requesting check: _____ Date: _____

Check amount: _____

Make check payable to: _____

Address: _____
Street City State Zip Code

Mail Check: Yes No Hold Check for: _____

Purpose: _____

If this check is for goods, have they been received Yes No N/A

If not, when will they be received? _____

Budget account to be charged: _____ **Amount:** _____

Budget account to be charged: _____ **Amount:** _____

Requestor: _____
Printed Name Signature

Approved: _____
Printed Name Signature

If over \$500 second approval: _____
Printed Name

Signature

If goods have not yet been received, retain a copy of this request and submit the copy when the goods arrive.

I certify that the church has received the requested goods. _____
Printed Name

Signature