

CHECK REQUEST

Person requesting check: _____ Ministry Team: _____ Date: _____

Pay to: _____ Vendor #: _____

Address: _____

City: _____ State: _____ Zip: _____

Purpose of purchase: _____

Invoice No.	Team Account #	Account Description	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

APPROVED: _____ Date: _____ Sent to Luca ☐

TOTAL: _____