



# Check Request for Ministries

Form used to request funds following the approval of the Purchase Requisition form.

Date of Request: \_\_\_\_\_

Name of Requestor: \_\_\_\_\_

Requestor's contact #: \_\_\_\_\_ Email: \_\_\_\_\_

Purpose for check: \_\_\_\_\_  
(Food, books, decorations, etc)

NOTE: Reimbursements are subject to approval; therefore, please govern yourself accordingly to the amount requested. Reimbursements ARE NOT guaranteed!

Amount of check: \_\_\_\_\_ Date needed: \_\_\_\_\_

Check made payable to: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
City State Zip code

Ministry Leader's Signature: \_\_\_\_\_

Pillar Coordinator's Signature: \_\_\_\_\_

## Office of the Executive Pastor:

Funds available: Yes [ ] No [ ] Explanation (if required) \_\_\_\_\_

Budget balance: \_\_\_\_\_ Budget line item: \_\_\_\_\_

Approved by Executive Pastor: \_\_\_\_\_ Date: \_\_\_\_\_

## Official Approval:

Chief Financial Officer's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_, received a check that was requested, to be used for the above purpose. I understand that I am responsible for **ALL** receipts equal to the total amount of the check and will complete an **Expenditure Report** for auditing purposes. If **ALL** funds **are not** used, I will return funds promptly and will notate it on my **Expenditure Report**.

Requestor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_