

# Crossroads Bible Church

FORMS MANUAL/FORM

|p.1/1|approved.12.09.01| ..... Check Request

**TO BE COMPLETED BY MINISTRY LEADER**

Date of request	/ /	Date check needed	/ /
Check amount	\$ _____ <i>(if reimbursement, attach receipts)</i>		
Payable to	_____ _____		
Deliver to	_____ _____ _____		
	_____ _____ _____		
	_____ _____ _____		
Ministry/Dep't		Account #	
Leader signature	_____ _____		
Budget limit	\$ _____	Balance after check	\$ _____

**FOR OFFICE USE ONLY**

Money available?	Y / N	Balance confirmed?	Y / N
Date check issued	/ /	Check number	

NOTES