

Check Request

Date Requested: _____
 Date Needed: _____

- Mail to addressee
- Direct Deposit (only for operating accounts)
- Hold Check with Receptionist
(may be picked up on Thursdays after 4 pm)

Payee: _____

Return to: _____

Address: _____

Need before regular processing on Thursdays

City/State/Zip: _____

Dept Number	Account Number	Account Name	Amount	Project Code	Explanation
TOTAL			-		

Requested by: _____

Administrator's Approval: _____

Minister's Approval: _____