

North Park Evangelical Covenant Church

Check Request Form

From: _____

Date: _____ Amount: _____

Payable To: _____

(Name of person / vendor / company)

Purpose:

* Please attach all supporting documents, receipts, etc.

Program coordinator signature _____

Council-chair of program signature / date _____

Budget account # _____

----- Treasurer's use below -----

Date paid _____

Check number _____

Preparer _____