

ADVENT LUTHERAN CHURCH -- OUTREACH -- CHECK REQUEST

Date:	_____ Church Debit Card Used -- check if YES
Make check payable to the following:	Mail Check _____ Hold check _____ Put in mailbox _____
Name:	
Address:	
Address line 2:	

Check Amount:	Date Needed:
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Please provide a full description of what we are paying for and attach invoices or other supporting documentation and/or special instructions for check:

The following BUDGET LINE ITEMS require a check request. Please indicate the budget line item to charge if appropriate. If one is needed other than listed here, please add below for "Other":

___ Synod Benevolence	___ Welcome Table Supplies	___ Advertising
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___ OTHER:

Please indicate the SPECIAL FUND to be used if appropriate. Others may be added as appropriate and necessary. Ensure money is available before submitting:

___ O-Adult Mission Trips	___ O-Helping Hearts Creche	___ O-Room in the Inn
___ O-Ash Wednesday	___ O-Kairos	___ O-Social Ministry Discretionary
___ O- Chili Supper	___ O-Loaves and Fishes	___ O-Souper Bowl Sunday
___ O-Crop Walk	___ O-Lutheran World Relief	___ O-Stop Hunger Now
___ O-Crisis Assistance Ministry	___ O-Parlor Class Project	___ O-Synod Benevolence
___ O-Feeding the Homeless	___ O-Peru Mission	___ O-Thrivent Choice
___ O-Free Store Ministries	___ O-Plaza Place	___ O-Witness Discretionary
___ O-God's Work Our Hands	___ O-Present Age Ministries	___ O-World Hunger
___ O-Habitat	___ O-Robinsdale Ministries	

___ Other:

___ Other:

SIGNATURES (2 required for each check request):

Requester (required):		Date:
Signature: →		
Authorizing Party (required):		Date:
(Board chair, council liaison, or other associated person)		
Signature: →		
If over \$5,000, Executive Council approval is also required:		Date:
Signature: →		

Please attach invoice(s) or other supporting documentation and have 2 signatures before submitting. Completed forms may be placed in mail slot for Church Administrator in cabinet above large copier., Copy to be retained by board/committee chair.