



### Check Request Form

**Corporation**

**Contract Worker** \*Please provide W-9, if not already on file\*

(Examples: lawn care or snow removal, rent or lease payments, attorneys, special speaker honorariums, love gifts for non-employees, gifts or payments to missionaries, etc.)

**Benevolence** for non-employee

**Reimbursement** for items purchased, mileage, medical/cafeteria plans, insurance, cell phone etc.

Payable to: \_\_\_\_\_

Address\*: \_\_\_\_\_

(\*new vendor/change of address only)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Invoice #: \_\_\_\_\_ Vendor Account #: \_\_\_\_\_

Bank Account: \_\_\_\_\_

Description	G/L Account #	Amount
<b>Total Check Amount:</b>		

Requested by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_