

1410 Dundee Road – Winter Haven, FL 33884 Office: (863) 298-9849 Fax: (863) 398-9849 www.redeemerwinterhaven.org

## **Check Request Form**

Date:			
Make check payable to:			
Person filling out form:			
Amount of check:		Inv#	
Line Item Name and #		· · · · · · · · · · · · · · · · · · ·	
Approved by:		<del></del>	
Reason for Check	Item(s)	Amount	
	Total		

Receipts must be attached.