Maple Springs Baptist Church
4131 Belt Road Capitol Heights, MD 20743

CHECK REQUEST FORM

DATE CHECK IS NEEDED: __________

PLEASE CHECK APPROPRIATE BOX: □ Disbursement □ Reimbursement □ Mail Check □ Place Check in Mailbox

CHECK REQUESTED BY: ______________________ DATE OF REQUEST: __________

NAME OF MINISTRY: ______________________

NAME OF PAYEE: ______________________ AMOUNT: ______________

STREET ADDRESS OF PAYEE: ______________________

_________________ (City) _________________ (State) _______________ (Zip Code)

PURPOSE OF FUNDS: ______________________

BUDGET CATEGORY: ______________

-----------------------------------------------

MINISTRY PRESIDENT / VICE PRESIDENT APPROVAL:

SIGNATURE: ______________________ DATE SIGNED: __________

MINISTER LEADER APPROVAL:

SIGNATURE: ______________________ DATE SIGNED: __________

-----------------------------------------------

CHECK RECEIVED BY:

SIGNATURE: ______________________ DATE SIGNED: __________

-----------------------------------------------

TO BE COMPLETED BY FINANCE MINISTRY ONLY

FINANCE MINISTRY APPROVAL:

SIGNATURE: ______________________ DATE SIGNED: __________

CHECK WRITTEN BY: ______________________ □ Treasurer □ Assistant Treasurer

ACCOUNT: □ General □ Missions □ Pastor’s Aid □ Special Fund
□ Operating Account □ Building Fund □ Pledge Fund □ Special Gifts

SPECIAL INSTRUCTIONS: ______________________

CHECK#: ______________________

Revised 01.2019