

**BETHANY BAPTIST CHURCH
275 WEST MARKET STREET
NEWARK NJ 07103**

CHECK REQUEST FORM

DATE REQUESTED: _____ DATED NEEDED: _____

PAYEE: _____ AMOUNT: \$ _____

ADDRESS: _____ TELEPHONE #: _____

INCLUDED IN BUDGET YES () NO ()

CHECK DISTRIBUTION (PLEASE CHECK ONE):

(x) RETURN TO _____ () HOLD FOR PICK UP BY _____
() U.S. FIRST CLASS MAIL _____ () OTHER _____

DESCRIPTION: _____

REQUESTED BY: _____
Signature (DATE)

DEACON ADVISOR APPROVAL: _____
Signature (DATE)

PAYMENT APPROVED BY: _____
Signature (DATE)

Signature (DATE)

FOR CONTROLLERS OFFICE USE ONLY:

ACCOUNT NAME	PROGRAM/FUND	ACCOUNT NUMBER
_____	_____	_____
_____	_____	_____
_____	_____	_____

CHECK #: _____