Fair Oaks Presbyterian Church

Check Request

Special	Pay to the order of: Requested by: (If different than payee) Instructions / Comments:	Please include address if new vendor or if you are not sure	e the Treasurer has the address.	
	Request Date:		Check Total:	
Line	Vendor *	Description	Account**	Amount
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
* If this is a reimbursement for money that you paid to one or more vendors, please include the vendor names as they appear on the receipt(s) ** Church and Logos expenses must be submitted on separate forms.				