



CHECK REQUEST FORM

Homestead Presbytery

ATTN: Treasurer, 2110 Sheridan Blvd., Lincoln, NE 68502

email: cherylr@homesteadpres.org

Cell (402) 499-8940 or office: (402) 474-0612

Office Use Only	Check Request/ Invoice #:
PAID:	
CHECK #:	
ACCT #s:	
SENT TO SYNOD:	
Requested by:	
Date Requested:	
Approved by:	
Date Approved:	

PAY TO:

(Please Print/type)

Address

City/Zip

Social Security Number (if appl.)

Description of Request

(i.e. committee expenses, mileage, etc):

Account Number	Committee/Grant	Date of Event	Item	Amount
	Reason for Trip: Mileage:		Odometer Start Odometer End Total Miles	

Total Check \$

Any supporting documentation must be attached to the check request.