

Mckinac Presbytery
Check Request/ Purchase Order



Requester: _____

Title: _____

Date: _____

Check Payable to: _____

Purpose: _____

How Often:

- Immediately
- Monthly
- Quarterly
- Annually

Account to be charged: (Please use only one):

Committee Name: _____

Staff Person: _____

Moderator/Vice-Moderator: _____

Council Chair: _____

Other: _____

TOTAL REQUESTED \$ _____

Authorized Signature (Required): _____

For Office Use:

Treasurer Reviewed

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