

# THE CHURCH OF SAINT MONICA

635 First Avenue - Berwyn, Pennsylvania 19312-1652  
Rectory Phone (610) 644-0110 ext. 120 - Rectory Facsimile (610) 695-0850  
Website: [www.saintmonicachurch.org](http://www.saintmonicachurch.org) - E-mail: [tcarey@saintmonicachurch.org](mailto:tcarey@saintmonicachurch.org)

*Business Office*

**Theresa Carey**  
*Business Manager*

## CHECK REQUEST FORM

- Please print clearly and complete this form in its entirety.
- Checks will be issued at the discretion of the Business Office.
- Please allow a minimum of two weeks for any payment to be processed.
- Please attach receipts or invoices that pertain to this check request.
- Please be sure that the tax-exempt status of the Church has been utilized. Sales tax will not be included in final payment for any reason.

\_\_\_\_\_  
DATE REQUEST SUBMITTED

\_\_\_\_\_  
DATE CHECK IS NEEDED

\_\_\_\_\_  
MAKE CHECK PAYABLE TO

\_\_\_\_\_  
SOCIAL SECURITY NUMBER (REQUIRED)

\_\_\_\_\_  
MAILING ADDRESS

\_\_\_\_\_  
CITY, STATE AND ZIP CODE

\$ \_\_\_\_\_  
CHECK AMOUNT

\_\_\_\_\_  
PERSON REQUESTING CHECK

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
BUDGET OR DEPARTMENT TO CHARGE

\_\_\_\_\_  
LINE ITEM TO CHARGE

\_\_\_\_\_  
REASON FOR CHECK: SERVICES PERFORMED (PLEASE ATTACH ALL RECEIPTS AND INVOICES)

\_\_\_\_\_  
COMMENTS OR SPECIFIC INSTRUCTIONS

### BUSINESS OFFICE USE ONLY:

\_\_\_ APPROVED    \_\_\_ REJECTED FOR TAXES    \_\_\_ DENIED    DATE PROCESSED: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PASTOR

\_\_\_\_\_  
SIGNATURE OF BUSINESS MANAGER