

Presbytery of San Gabriel

CHECK REQUEST:

To: Bookkeeper
Presbytery of San Gabriel 9723
Garibaldi Avenue Temple City, CA
91780
Fax: 626 226-5767
Email: bookkeeper@sangabpres.org

Special Instructions To Bookkeeper:

MAKE CHECK PAYABLE TO: _____

MAIL CHECK TO: _____

ADDRESS: _____

Date Received: _____

Due Date: _____

<u>Account</u>	<u>Class</u>	<u>Amount</u>	<u>Description:</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL CHECK: \$ _____

PERSON/COMMITTEE REQUESTING: _____

APPROVED: _____

FOR OFFICE USE ONLY:	
Check Number: _____	Date Issued: _____
Date Mailed: _____	Initials: _____