

St. Mary Magdalen Parish  
7 Sharpley Road  
Wilmington, DE 19803  
302-652-6800

## CHECK REQUEST FORM

*\*\*Please return to Finance Office\*\*  
with attached receipt(s)*

### VENDOR INFORMATION

REQUESTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

PAY TO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

AMOUNT REQUESTED:

DATE NEEDED:

#### INSTRUCTIONS FOR DELIVERY:

- CALL FOR PICKUP \_\_\_\_\_
- MAIL TO PAYEE
- OTHER DELIVERY INSTRUCTIONS

#### ADDITIONAL COMMENTS (OPTIONAL):

APPROVED BY: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

### FOR OFFICE USE ONLY

APPROVED

REJECTED

GL ACCT CODE:

DATE PAID:

CHECK NO: