

# LOCAL CHURCH DEPARTMENT REQUEST FOR FUNDS

Treasury Department

*This form must be completed by local church department leader and submitted to your local church treasurer. Church treasurer must keep on record for auditing purposes.*

Please type or print clearly in ink.

## GENERAL INFORMATION

Date \_\_\_\_\_ \$     ,    .    
Amount (in numbers)

Amount (in words) \_\_\_\_\_

Church Departmental Funds \_\_\_\_\_

Check Made to \_\_\_\_\_ Check Number \_\_\_\_\_

Received by Name \_\_\_\_\_ Received by Signature \_\_\_\_\_

Approved by \_\_\_\_\_ Date \_\_\_\_\_



ALLEGHENY EAST CONFERENCE CORPORATION  
of Seventh-day Adventists®

Revised 03/05/2009

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