ADVENT LUTHERAN CHURCH -- NURTURE & SUPPORT -- CHECK REQUEST

Date:	Church Debit Card Used check if YES		
Make check payable to the			
following:	Mail Check	Hold check	Put in mailbox
Name:			
Address:			
Address line 2:			
,			
Check Amount:	Date Needed:		
Please provide a full description of what we are paying for and attach invoices or other supporting documentation and/or special instructions for check:			
The following budget line items typically require a check request. Please indicate the budget line item to charge if appropriate. If one is needed other than listed here, please add below for "Other":			
Stewardship Campaign	College Nurt	ure Ministry	Care Ministry
Stewardship Education	Member Ass	istance Program (MAP)	Connect Ministry
Fun & Fellowship Events	New Membe	r Materials	Congr Relationship & Support
OTHER: Please indicate the Special Fund to be used if appropriate. Others may be added as appropriate and necessary. Ensure money is available before submitting:			
NS-Adventurers Other	NS-Fellowshi		NS-Members in Crisis
NS-Adventurers Christmas Jars		Peace University	NS-Quilters Group
NS-Care Ministry	NS-Funeral R		NS-Staff Gifts
NS-Coffee Fund	NS-Kitchen	,	NS-Stewardship
NS-College Packets	NS-Lay Rene	wal	NS-Young Adult Sunday Dinners
NS-Congregational Life	NS-Line Danc	ting	
NS-Discretionary	NS-Maintena	nce Reserve	
Other: SIGNATURES (2 required for each check request):			
	1		
Requester (required):			Date:
Signature:	>		
Authorizing Party (required)			Date:
(Board chair, council liaison, or other associated person)			
Signature: —	>		
If over \$5,000, Executive Council approval is also required: Date:			
Signature:	>		