Ambassador BIBLE CHURCH

CHECK REQUEST FORM

Please complete and return to finance@ambassadorbiblechurch.org with copies of all receipts.

Date: _____

Payable to: _____

Address: _____

_____

_____

Phone: _____

Email: _____

☐ Please update my contact information.

☐ Please pay me via Zelle, using my ___ email or ___ phone number (select one). This option is only available for amounts up to $1,000.

Description/Purpose/Notes: _____

_____

Account	Itemized Description	Amount
	TOTAL	

Approval signature: _____

Print name: _____

Internal use only:
Approver/Approval date:

Ver. Oct 2025