

CHECK REQUEST

DATE: _____

DEPARTMENT BILLED:

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> 1-10 Administration (General) | <input type="checkbox"/> 1-50 Building /Code | <input type="checkbox"/> 2-70 Water |
| <input type="checkbox"/> 1-20 Police Department | <input type="checkbox"/> 1-55 Parks & Rec | <input type="checkbox"/> 2-75 Sewer |
| <input type="checkbox"/> 1-30 Court | <input type="checkbox"/> 1-60 Public Works | <input type="checkbox"/> 2-80 Garbage |
| <input type="checkbox"/> 1-40 Fire Department | <input type="checkbox"/> 1-65 City Property | <input type="checkbox"/> Other: _____ |

REMIT TO:

GIVE CHECK TO:

NEEDED BY:

IN PAYMENT OF:

SPECIAL INSTRUCTIONS:

	ACCOUNT NUMBER	AMOUNT
Requestor:	_____	\$ _____
Approved by:	_____	\$ _____
Paid:	_____	\$ _____
Check #:	_____	\$ _____
	TOTAL REQUEST	\$ _____