

Pay to the Order of:	
Address:	
	Pay to and mail to person/company indicated on attached document.

TRUSTEES OF THE DIOCESE OF MINNESOTA

REQUEST FOR PAYMENT

(Please be sure to attach original invoice)

DESCRIPTION / ACCOUNT DISTRIBUTION	ACCOUNT NUMBERS				(DEBIT)	(CREDIT)	
	FUND	ACCOUNT	SUB ACCOUNT	R cd	Enter expense amounts here	Enter income or expense <u>reduction</u> amounts here	
Due date:		Enter amount of check here: ▶					

(Write "GJ" if this is to be a journal entry instead of a check)

(Please obtain department approval before submitting request.)

Requested By:	Date:	Department Approval:	Date:
Phone:		Finance Approval:	Date:
		A/P entry:	Date:

If 1099:

	Please add SSN:
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Special instructions:

	Be sure to include attached document(s) with check.
	Please deliver check to "requested by" when printed.
	Please call "requested by" for pickup when check is printed.
	Please call payee for pickup when check is printed.
	Do not print check until instructed to do so by:
	Other:

Common FUND #s:

000	Operating Fund
600	Mission Real Estate Fund

Common ACCOUNT #s:

60100	Water and sewer
60110	Electricity
60120	Heating
60200	Janitorial service
60220	Snow removal
60221	Lawn care
60400	Maintenance service
60410	Repair service
60420	Repair material
63000	Property tax expense
63100	Property insurance expense
70000	Telephone expense
75200	Legal expense
79000	Miscellaneous expense