

**DIOCESE OF YAKIMA
CHECK REQUEST FORM**

Name: _____

Authorized by: _____

Date requested: _____

Payable to: _____

Amount: _____

Description: _____

PLEASE ATTACH ALL RECEIPTS TO THIS FORM

Program - check all that apply or add description if not listed
(if more than one applies, put the amount or percent applicable to each)

		<u>Amount (or Percent)</u>			<u>Amount (or Percent)</u>
098	<input type="checkbox"/> Administrative	_____	201-21	<input type="checkbox"/> Religious Education K-8	_____
099	<input type="checkbox"/> Finance Office	_____	201-22	<input type="checkbox"/> Catechetical Congress	_____
100	<input type="checkbox"/> Bishop's Office	_____	204-67	<input type="checkbox"/> Teacher Training Spanish	_____
101	<input type="checkbox"/> Annual Catholic Appeal	_____	203-40 / 41	<input type="checkbox"/> English Youth Ministry	_____
103	<input type="checkbox"/> Development Office	_____	204-49	<input type="checkbox"/> Hispanic Youth Ministry North	_____
099-19	<input type="checkbox"/> Maintenance	_____	204-50	<input type="checkbox"/> Hispanic Youth Ministry South	_____
096	<input type="checkbox"/> Priest Retirement Fund	_____	202-37	<input type="checkbox"/> Magnificat English	_____
108/109	<input type="checkbox"/> Seminarian Education Fund	_____	202-35	<input type="checkbox"/> Magnificat Spanish	_____
	Name: _____		202-36	<input type="checkbox"/> Hispanic Leader Movements	_____
108-58	<input type="checkbox"/> Migrant Ministry	_____	201-28	<input type="checkbox"/> St Andrew New Catechet Evangel	_____
097	<input type="checkbox"/> Clergy Support	_____	201-27	<input type="checkbox"/> Sister's Exchange	_____
105	<input type="checkbox"/> Office of Canonical Concerns	_____		<input type="checkbox"/> Other: _____	_____
211	<input type="checkbox"/> Deacon Formation	_____		<input type="checkbox"/> Other: _____	_____
208	<input type="checkbox"/> Social Justice	_____		<input type="checkbox"/> Other: _____	_____
214	<input type="checkbox"/> Campus Ministry	_____		<input type="checkbox"/> Other: _____	_____