

**APPENDIX C**

**Diocese of Yakima  
5301-A Tieton Drive  
Yakima WA 98908**

**CHECK REQUEST**

**DATE:** \_\_\_\_\_

**PARISH OR INSTITUTION:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**AMOUNT OF CHECK: \$** \_\_\_\_\_

**REASON FOR CHECK:** \_\_\_\_\_

**DATE CHECK NEEDED:** \_\_\_\_\_ (over \$10,000 allow 5 working days).

IF SAVINGS WITHDRAWAL, ACCT. # \_\_\_\_\_

**PASTOR OR ADMINISTRATOR SIGNATURE** \_\_\_\_\_

Please mail to diocesan accounting office or fax to: 509-966-8019

You can also e-mail to [darci.heinlein@yakimadiocese.org](mailto:darci.heinlein@yakimadiocese.org)

If this is for a building project, please include a copy of the contractor's application for payment with this request.

\_\_\_\_\_  
For Diocese use only

**VENDOR NUMBER** \_\_\_\_\_

**PAYMENT DATE** \_\_\_\_\_

**APPROVED BY** \_\_\_\_\_

**Chief Finance Officer**