

Lakeview Christian School

Check Authorization

Date: ___/___/___

Vendor/Payee: _____

Description	Budget Code	Amount
		\$
		\$
		\$
		\$
Total Amount		\$

Requested By: _____

Submitted ___/___/___ Received: ___/___/___

APPROVALS

Principal: _____/___/___

Finance Admin: _____/___/___

Pastor: _____/___/___

Signer 1: _____ Signer 2: _____

Check #: _____ Issue Date: ___/___/___

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