

# Check Request Form



Payable to: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Requested by: \_\_\_\_\_  
 Date Requested: \_\_\_\_\_ Due Date: \_\_\_\_\_ Check Amount \_\_\_\_\_

- New Vendor – W9 and Vendor Registration Form must be attached.
- W9 - U.S. company
- Vendor Registration Form FOR ACCOUNTS PAYABLE ONLY Vendor # \_\_\_\_\_
- Service (1099)

**(Request over \$5,000 must be approved by CFO)**

Reason for expenditure: \_\_\_\_\_

Disposition:  US Mail  Pick up Name \_\_\_\_\_

Company	Account	Amount
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
		Total: \$ _____

Submitted by \_\_\_\_\_  
 \_\_\_\_\_ Finance Director / CFO

Approved by \_\_\_\_\_  
 \_\_\_\_\_ Department Head - Print Name      \_\_\_\_\_ Department Head - Signature

To ensure payment in a timely manner, complete the entire form and obtain necessary signatures. Submit original form to the Accounting Department (**Accounting@EmbraceFamilies.org**) with all the required supporting documentation. Allow 7–10 business days for processing. Incomplete and missing documentation will prolong process.

**FINANCE and ACCOUNTING USE ONLY - Please process check from the following:**

Bank Account	Company	GL	Acct #
<input type="checkbox"/> Embrace Families (Holdings)	100	11550	2302
<input type="checkbox"/> Embrace Families (Holdings – Temp Restricted)	100	11551	2047
<input type="checkbox"/> Embrace CBC Operating	200	11501	4852
<input type="checkbox"/> Embrace CBC Programs	200	11510	2054
<input type="checkbox"/> Embrace CBC Temp Restricted	200	11505	2062
<input type="checkbox"/> Embrace Solutions (CI) Operating	500	11560	2070
<input type="checkbox"/> Embrace Solutions (CI) Temp restricted	500	11561	2088
<input type="checkbox"/> Integrated Health	700	11570	3075
<input type="checkbox"/> Integrated Health Temp	700	11571	1877
<input type="checkbox"/> Embrace Foundation Operating	400	11545	2138
<input type="checkbox"/> Embrace Foundation Temp CWSP	400	11546	1882
<input type="checkbox"/> Embrace Foundation Temp restricted	400	11548	1874
<input type="checkbox"/> Embrace Foundation Online	400	11547	2120