

**PLEASE COMPLETE ONLY WHERE HIGHLIGHTED  
AND RETURN TO PENNY WEISS IN PARISH OFFICE.**

**Parishes of The Archdiocese of St. Louis  
Parish Check Request  
*St. Catherine Laboure***

**Today's Date:** \_\_\_\_\_ **Date Payment Needed:** \_\_\_\_\_

**Make Check Payable To:**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**State**

\_\_\_\_\_  
**ZIP**

<b>Account No.</b>	<b>Amount</b>	<b>Description</b>	<b>Class</b>

**Total**

Approved By: \_\_\_\_\_

Authorized Signature

→ ***Receipts and Documentation Attached***