

CHECK REQUEST / PURCHASE ORDER

Your ministry head **MUST** sign at the bottom of form.

A P.O. **MUST** be obtained from the church treasurer **PRIOR** to making any purchase (or combined purchases) of \$250 or more.

Is this an expense reimbursement ? Yes ___ No ___ (if yes, attach receipts)

The following number must appear on all related correspondence, shipping papers, and invoice: **P.O. NUMBER:** _____
(assigned by Treasurer upon approval)

Write Check to / Charge to (circle one):

name: _____

address: _____

email: _____ phone: _____

Ship to:

Today's Date:	Requested by:	Date Needed:

Description	Quantity	Unit Price	Total

For Purchase Orders:	SUBTOTAL	
___ Will this be part of a larger project?	SHIPPING & HANDLING	
___ Will this be a recurring expense?	OTHER	
___ Is this a budgeted expense?	TOTAL	
___ Can this purchase be delayed? If so, last date for delay _____		

Check Procedure (check one):

- ___ Mail Check (provide address above)
- ___ Leave at Front Desk
- ___ Other (specify) _____

Signatures:

- Requested by: _____
- Ministry Head or Pastor: _____
- Treasurer: _____