

Money Requisition Form

NO: _____

FILE: _____

This form is used to request the funding of **already approved** and allocated departmental monies. Please complete this form in its entirety.

YOU MUST BE A DIRECTOR OF THE DEPARTMENT/MINISTRY TO REQUEST FUNDING.

Today's Date: ____/____/____ Your Name & Ministry/Department: _____

Why are the items/services being purchased? _____

Please list below all items/services to be purchased:

_____	_____
_____	_____
_____	_____

Where will the item(s) be stored (if tangible)? _____

Total of Money Requisition: \$ _____

Payable to: _____

Payee Address: _____

Payee City: _____ Payee State/ZIP: _____

Payee Telephone: _____ Payee Email: _____

When do you need the requested funds: _____ Have you verified that you have allocated funds available? YES

I will pickup a check. Please mail a check. Please make payment with credit card.

I promise that the items (or services) purchased are to be used exclusively for Trinity Baptist Church and the church has already allocated funding for this purchase.

Further, I promise to keep all items in as good condition as possible at Trinity Baptist Church or at an approved location (if applicable).

Departmental
Director's Signature: _____

Print Name: _____

Date: _____ Daytime Phone: _____

Church Office Use Only

Funding Acct _____

Line-Item Verified _____ Funds Approved _____

Special Item Approved in Conference on _____