

# 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 \_\_\_\_\_