

Purchase Order Request Form

Date of Request _____

_____ Petty Cash

_____ Authorization to Purchase (Vendor)**

_____ Check Request

_____ Credit Card Request (in-house only)

_____ Reimbursement

Your Name _____ Your Phone # _____

Ministry Department _____

ALL PURCHASE ORDER REQUESTS MUST BE TURNED IN 2 WEEKS PRIOR TO PURCHASE

Description of Item (Item # if applicable)	Cost Each	Quantity	Total
			\$
			\$
			\$
Tax			\$
Total			\$

Check Request: _____ Distribute to me through church office

_____ Please have church office mail to: _____

Payee Name _____

Date check needed by _____

_____ I would like the church office to place this order (In-House if CC/Authorization if Vendor)

**Web Address or Vendor/Company name: _____

For Vendor Purchases please choose: _____ Deliver to Church _____ Ministry Rep will Pick up

Ministry Leader Signature for Approval _____ Date _____

OFFICE USE ONLY

Ministry Account _____
 Current Balance \$ _____
 This Purchase \$ _____
 New Balance \$ _____

Church Office Approval

Signature _____ Date _____

Signature _____ Date _____