Tabernacle Bible Church

Purchase Requisition/Check Request

(Revised 10/21/15)

Must submit 14 days in advance

Please complete form in its entirety Date: _____

Is this item in your budget? Yes _____ No _____

Reason for Purchase: _____

_____

Ministry to charge: _____

Requested By: _____ Phone Number: _____

Ministry Leader's Signature: _____ Date Needed: _____

Only One Vendor Per Form

Description of Item(s) to be Purchased	QTY	Price per Unit	Total
Note: Attach grocery list for food items			
☐ **Enclose Tax-exempt form**			
Pay by:			

☐ **Credit Card**: ____Visa ____ MasterCard (Sam's) ____Dillons Wal-Mart____ Other_____

☐ **Check** (Address below)

☐ **Check Payable to**:_____Phone#_____

Address:_____

☐ **SYSCO ORDER**

Check # _____

☐ **Check to be picked up by** _____

☐ **Check to be mailed**

_____ _____

Requisition Committee Signature Requisition Committee Signature

_____

Pastor's Signature

_____**Requisition Disapproved** ☐

Reason for Disapproval: _____

_____