Zion Missionary Baptist Church

Requisition Form

FUNDING REQUESTS ARE SUBMITTED USING THIS FORM.
REQUESTS ARE PROCESSED EACH WEEK AND MUST BE SUBMITTED TO THE BUSINESS OFFICE BY **TUESDAY**

VENDOR OR PAYEE NAME:		
PAYEE STREET ADDRESS:		
CITY:	**STATE:**	**ZIP:**

Quantity	Description or Purpose	Cost	Account Code
	Subtotal	**$** 0.00	
	Tax	**$**	
	Total	**$** 0.00	

NOTES / COMMENTS:

Requisitioned By:

Phone Number:

Date Requested:

Date Needed:

MINISTRY CODE: (check one)

□ 50 Pastor	□ 57 Education	□ 5D Recreation	□ 5R Retreats
□ 52 Deacons	□ 58 Service	□ 5E Operations	□ 5S New Building
□ 53 Mothers	□ 59 Music	□ 5F Business Administrator	□ Capital Expense
□ 54 Finance	□ 5A Youth	□ 5G Non-Budget Fund	□ Crossing Jordan
□ 55 Trustees	□ 5B Men	□ 5H Deaconess	□ Other
□ 56 Missions	□ 5C Women	□ 5P Payroll	

Is Item Budgeted in Ministerial Plan?
□ Yes, Please Sign
□ No, Complete amendment proposal

Signature of Approving Director

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Check One: □ Mail to Payee □ Director's Box

COMPLETED BY TREASURER

Check Number	Check Date	Amount of Invoice	Invoice Number	Initials	Entered By

Director Retain Copy Prior To Submitting To Requisition Mailbox (Revised 6/2015)