



Senior Pastor, Pastor Richard James

Ministry Funding - Purchase Request Form

Ministry: _____

Date Submitted: _____

Ministry Leadership Approval for Request: _____

Contact Person: _____

Phone: _____

Amount of *Non-Budgeted* funds requested: _____

Date needed: _____

Check Payable To: _____

Address: _____

City / State / Zip _____

Phone: _____

E-Mail: _____

Please fill out payable information completely. Failure to do so may result in delayed funding.

IMPORTANT: RECEIPTS AND PACKING SLIPS MUST BE TURNED IN TO THE BOOKKEEPING OFFICE ON ALL FINALIZED PURCHASES

Destiny Credit Card Purchase Requested: **Yes** **No**

Personal Reimbursement for Purchase: **Yes** **No**

Please submit along with this Request Form, a detailed description of your purchase and/or funding request. Attach any support information necessary. (i.e.: a copy of internet purchase information, costing breakdown for funding, etc.)

Reason: _____

Approved By: _____

Date: _____