

Bazzel Creek Missionary Baptist Church
Purchase Request Form

Date of Request: _____ Ministry/Auxiliary: _____ (REQUIRED)
Name of Ministry Leader/Requestor (Signature): _____ (REQUIRED)
Trustee Liaison (Print): _____ Trustee Liaison (Signature): _____ (REQUIRED)

Payee: Where/Who do we Purchase From: _____

**Note: Please plan to fill out an additional form for each additional Payee/Merchant*

***Note: If purchasing from an online merchant, REQUIRED to **print & attach** their respective ordering information*

****Note: If more than one Ministry/Auxiliary is purchased for in one transaction those item(s) need to be listed out in an itemized listed and how the funds will apply to each ministry*

What is the Purpose/Benefit of these item(s):

** If necessary, please attach a full explanation of Purpose/Benefit*

Item(s) Requested for Purchased: _____

**Note: if additional space is needed, please attach a full list to this form*

Estimated Cost of Item(s): \$ _____ Does your total include Tax, Shipping, or other charges? _____

Total Cost of Item(s) Purchased: \$ _____

Budget Line Item to be Coded to: _____ (REQUIRED) Current Budget Balance: _____ (REQUIRED)

** Note: Auxiliary Leaders are responsible for maintaining budget information*

Please advise if these items are needed by a particular date: *If Yes, what date:* _____

Who should be notified within the Ministry/Auxiliary if there are questions or when these items have been received?

Name: _____ Phone Number: _____

*** Note: All Above Information is Required to Process Your Request**

TO BE COMPLETED BY TRUSTEE/FINANCE DEPARTMENT – DO NOT WRITE BELOW THIS LINE

Approved by Trustee/Finance

Denied by Trustee/Finance

Trustee/Finance
(Print) _____

Trustee/Finance:
(Signature) _____

Justification: _____

** Note: If additional space is required, please attach the full Justification separately*

**Debit Card Number (Last 4 digits): _____ **Check# and Date Written: _____ / _____ (REQUIRED)
**Date/Initials Keyed into System: _____ / _____