

First Baptist Church of Springfield
Request for Goods or Services Over \$250 and
Payment Request Form for All Purchases

Date of request: _____

Checks are written weekly. Please make arrangements if payment is needed sooner.

Person requesting purchase/payment: _____

Check

Credit Card

Total Amount of purchase: \$ _____

(Please make sure receipts are attached)

Description of Goods, Services, etc. for which check is being requested:

Make check payable to: _____

Charge to account number: _____

GOODS AND SERVICES OVER \$250:

NOTE: If items are ordered on a regular basis (cleaning and office supplies, literature, or utilities bills) no approval signature is needed. (Please check box if appropriate)

* Committee Chairperson Signature if the amount is over \$250.00. _____

** Chairman of Finance Signature if the amount is over \$500.00. _____

*** ** Documentation may be substituted for approval (email from Committee Chairperson or Finance Committee, etc.)**

OFFICE USE ONLY:

Account #: _____

Check date: ____/____/____

Check#: _____