

ANTIOCH MISSIONARY BAPTIST CHURCH

CHECK REQUISITION

Today's Date _____ When needed _____ Amount _____

Ministry/Requestor Name _____

CONTACT INFORMATION

PHONE: _____ EMAIL: _____

Event/ Purpose _____

Check Payable to: _____

Address _____

City/State/Zip _____

MINISTRY LEADER SIGNATURE _____

Please attach documentation. (Invoice or Receipts)

Turn in request to the church office so it may be logged in and you can receive a copy of the request.

****** Checks for \$250 or less take up to (2) weeks to process *(subject to fund availability)***

******Checks for \$251 or more can take up to four (4) weeks to process *(subject to fund availability)***

YOUR MINISTRY WILL BE NOTIFIED BY THE CHURCH OFFICE AT LEAST ONE WEEK IN ADVANCE SHOULD THERE BE AN ISSUE WITH FUNDS AVAILABILITY.

FOR OFFICE USE ONLY	
CHECK # _____	DATE _____