

Grace World Outreach Church REQUEST FOR PURCHASE

DATE: _____

REQUESTED BY: _____

AMOUNT: _____ APPROX
ACTUAL

CHECK MADE OUT TO: _____
ADDRESS: _____

GIVE CHECK TO: _____

MAIL - ADDRESS: _____

PURPOSE: _____

COMMENTS/QUOTES AND ESTIMATES RECEIVED: _____

ACCOUNT #: _____ PASTOR AUTHORIZED: _____
INVENTORY TAG NEEDED [] YES [] NO

CHECK AUTHORIZATION
(PLEASE ATTACH INVOICE, RECEIPT, ORDER FORM OR OTHER DOCUMENTATION)

APPROVAL: _____

VENDOR #: _____