

# HOLY ROSARY CHURCH DISBURSEMENT REQUEST

- INVOICE ATTACHED
- PURCHASE MADE, INVOICE IN TRANSIT
- CREDIT CARD CHARGE

DATE OF REQUEST: \_\_\_\_\_ REQUESTED BY: \_\_\_\_\_

PURPOSE/DESCRIPTION OF REQUEST: \_\_\_\_\_

PAYEE NAME (& ADDRESS IF NOT ON RECEIPT): \$ \_\_\_\_\_ ACCT NO. \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_ ACCT NO. \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_ ACCT NO. \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_ ACCT NO. \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

MAILING INSTRUCTIONS: \_\_\_\_\_