PENSACOLA BAY BAPTIST ASSOCIATION REQUISITION

DATE REQU	JESTED:		
DATE NEED	TO ORDER BY:		
DATE NEED	TO RECEIVE/WITHDRAW BY:		
PAYABLE TO	D:		
PERSON RE	QUESTING MONEY:		
ACCOUNT:			
STAFF SIGN	ATURE:		
QTY ORDER NUMBER/DESCRIPTION		UNIT PRICE	TOTAL PRICE
	SHIPPING & HANDLING:		
GRAND TOTAL:			
		ASE: □PBBA Budget □F&H Budget □Designated □Other	
PURCHASE	D BY: □PERSON REQUESTING ITEM □STAFF	☐MINISTRY AS:	ST.
□ СНЕСК Т	O BE CUT PRIOR TO PURCHASE (RECEIPTS & EXTRA CASH TU	RNED IN LATER)	
□ СНЕСК Т	O BE CUT AFTER PURCHASE (WHEN RECEIPTS TURNED IN).		
	For Office Use Only		
Payment Type: Brian CC Sharon CC Sam's CC Office Depot CC Check Other: Check Number: Reviewed by Bookkeeper: (Initial here) DATE RECEIVED:			
Director's S	ignature:		

