

Church of the Little Flower

Purchase Requisition / Request for Check

Date:

Vendor (PAYEE):

Amount:

Account (Descr. Of Item):

Description of Goods and Services , Name of Vendor

Requested by:

Date:

Check to be picked up or mailed _____

Approved by: _____

Date: _____

PAYMENT

Check # _____

Date: _____

Amount: _____