



Purchase Order #:

Purchase Order

Please submit your Expenditure Request **at least one week prior** to the date that you need to spend the funds. We will check your budget for availability of funds and notify you via email upon approval or disapproval. Also, if you do not fill in this request completely, the processing of your request will be delayed. Please note checks are written on Wednesday of each week.

Today's Date:

Date Needed:

Campus/Location:

Requested by:

Ministry Name:

Email Address:

Amount:

☐ Budgeted ☐ Non-Budgeted

Description of How Funds are to be used:

Method of payment

- ☐ With a Check:
- ☐ With a Credit Card:
- ☐ With an Approved Account:
- ☐ By Reimbursement:
- ☐ By Invoice:

Payee Information

Payee:
Address:
Address 2:
City/ST/Zip:
In Memo:

For Accounting Use Only:

Once the Check is written:

- ☐ Mail to payee
- ☐ Pick up from Accounting Department
- ☐ Interoffice to: _____

Authorization Signatures:

Ministry Leader: X _____

Dept Leader: X _____

Accounting: X _____

If you have any questions regarding this form, the Financial Office of Household of Faith Church may be contacted at 225.644.3111 during the hours of 9:00AM – 4:00PM, Monday through Friday.