Destiny Worship Center Christian Church
(Disciples of Christ)

Purchase Request/ Reimbursement Form

Complete the form entirely. Have your assigned ministerial overseer to sign off. **Form must be turned in at least 2 weeks in advance.**	
Name:	
Today's Date:	
Ministry:	

Purchase Request or Reimbursement:	
Date Needed/ Date of Purchase:	
Amount of Request/ Purchase	
What will this be used for?	
Reimburse?:	

Itemize your expenses:	
Name of Item/ Description	Amount
TOTAL AMOUNT REQUESTED	$0.00

After prayerfully considering the needs of the ministry in which

I serve at Destiny Worship Center Christian Church, I submit my requests.

Signature of Requestor

Date Signed

Signature of Ministerial Overseer

Date Signed