

Check No. _____ Check Date _____ Approved: _____ <p style="text-align: center;">For office use only</p>
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Destiny Church  
 Check/Funds Requisition Form

Make Check Payable To: \_\_\_\_\_

Amount Needed (estimate if applicable): \_\_\_\_\_

Date Funds/Check Needed: \_\_\_\_\_

Ministry(s) To Be Charged: \_\_\_\_\_

Purpose & Description of This Purchase: \_\_\_\_\_

\_\_\_\_\_

Signature of person submitting this form

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of ministry leader who has oversight of  
 this ministry (if different than above)

\_\_\_\_\_

Date

NOTE: Please attach or turn in receipts. This completed form must be turned into the box of Destiny's Treasurer, Jason Thompson.