

Mt. Ennon Baptist Church

Disbursement Voucher

Section I

Requested By: _____

Date: _____

Department	Ministry

Check Mail Check Place Check _____

Credit Card Date Items should be ordered by _____

Payment To: _____

Amount: _____

(Numeric Amount)

(Written Amount)

Description:



Section II

Approved By Department Head

Date

Approved By Executive Pastor

Date

Initialed By _____
(Church Business Administrator)



Section III

Date Received _____

Date Processed _____

Check Number _____

Check Amount _____

Processed By _____

Date Forwarded to Financial Secretary for ordering _____

