

**TRINITY BAPTIST CHURCH**  
**124 West Darlington Street**  
**Florence, SC 29501**

**Payment Request Form**

<b>Name of Payee:</b>	
<b>Payee ID #: (Vendor Number)/Invoice #:</b>	
<b>Requested By: (Name/Title)</b>	
<b>Reason for Disbursement:</b>	
<b>Total Amount Requested:</b>	

<i>Department/Auxiliary Head</i> <b>Approval Date:</b>	<i>Finance Department</i> <b>Approval Date:</b>	<i>Pastor</i> <b>Approval Date:</b>
<b>Signature:</b>	<b>Signature:</b>	<b>Signature:</b>

**For Finance Department Use Only**

	Amount Allocated:	Budget Line Item:	Chart of Accounts ID Number:
<i>OPERATIONS</i>			
<i>MAINTENANCE / REPAIRS</i>			
<i>BENEVOLENCES</i>			
<i>OFFICE SUPPLIES</i>			
<i>MEMBERSHIP PROVISIONS</i>			
<i>UNIONS/CONVENTIONS</i>			
<i>MINISTRIES / SUNDAY SCHOOL</i>			
<i>OTHER</i>			

**For Finance Department Use Only**

<b>Date Posted:</b>	<b>Date Paid:</b>	<b>Check #</b>	<b>Processed by:</b>