

Silverdale Community Church

9982 Silverdale Way | P.O. Box 1400
Silverdale, WA 98383

Payment Authorization

Today's Date: _____

Date of Purchase: _____

Person who made the purchase (if different from Ministry Team Leader)

Date: _____

Authorized by (Ministry Team Leader)

Vendor Name: _____

(Who the check is to be made out to)

Amount of Purchase: _____

Description of item(s) or services purchased: _____

Budget Line item to be charged: _____

Date: _____

Check #

Authorized by (Pastor or Finance)