

MOUNT CARMEL BAPTIST CHURCH
5732 RACE STREET
PHILADELPHIA, PA 19139
REV. DR. DONALD D. MOORE, PASTOR

Date: _____

To Mount Carmel Baptist Church Trustee Board Ministry Voucher Committee:

Name of Auxiliary or Ministry:

Date of Activity:

Description of Activity:

Amount: \$ _____

(Only One check per requisition)

Make check payable to:

Payee: _____

Street Address: _____

City, State & Zip: _____

Check Boxes:

Did you attach original receipts, documents, contracts or invoices?

Is this the original requisition with original signatures?

Signature: _____ Title _____

Signature: _____ Title _____

Mandatory Name & Contact Telephone Number:
