The New Mount Zion Miss Reverend	sionary Baptist Church of Larry L. Roundtree, II, Pa	-
MINISTRY MONETARY REQUEST FORM		
Today's Date:		
Ministry:		
Amount Requested: \$	Date Request is Needed*:	
From: Church Budget Ministry Account Request for:		
Please make check payable to: Delivery Instructions:Return to Ministry Mailbox Mail to Payee Address		
Approved By:		
Signature Ministry President/Vice-Presiden	Print Name	Date
Signature Ministry Financial Secretary	Print Name	Date
Signature Director: (When applicable)	Print Name	Date
Signature Deacons Ministry Chairman	Print Name	Date
Signature Finance Committee Chairperson	Print Name	Date
Signature Church Administrator	Print Name	Date
Two (2) signatures are rec	uired for all expenses/reimburs	<mark>ements</mark> .
*Note: While the Financial Policy states forms should there may be special circumstances. In these instances		
If the request is submitted by end of services on Sunda 6pm on Wednesday the check will be available for picl		
Receipts for requests must be provided within fourtee days after the expense is paid.	n (14) days after the check is written. Retur	n any excess funds within fourteen (14)
Please contact Devyn Freeland, Comptroller at <u>finance@nmztampa.com</u> for any questions. _{Updated 05/17/2021}		