Berachah Bible Church **Purchase Order/Reimbursement** Form 02-002-05

310 Corinth Road
Jonesboro, GA 30238
p. 770.461.2466
f. 770.461.9209

Date: _____
P.O.#: _____
Requisitioner: _____
Ship Via: _____

VENDOR
Name: _____
Company Name: _____
Street Address: _____
City, St, Zip: _____
Phone: _____
Email/Website: _____

SHIP TO
Attention: _____
Company Name: _____
Street Address: _____
City, St, Zip: _____
Phone: _____
Email/Website: _____

ITEM #	DESCRIPTION	QTY	UNIT PRICE	TOTAL
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00

TAXES

Tax Rate	Tax
0%	$0.00
0%	$0.00

TOTAL TAX: $0.00

Subtotal: $0.00
Total Tax: $0.00
Shipping & Handling: _____
Other: _____
TOTAL: $0.00

***Authorized By*:** _____

PAYMENT TYPE: Church Credit Card
Church Credit Card: _____
Vendor Charge Account: _____

RECEIPTS & packing slips *are to follow purchase within 2 business days*
Submitted via: Fax to Church Office (770.461.9209)
(Reimbursement process cannot be completed until receipts are received by the church office.)

If you have any questions about this purchase order, please contact:

(Name, Phone, Email, Fax)

Berachah Account Charge Name:
_____
Berachah Account Charge Number:
_____
Reimbursement Completed:
_____