

Church of St. Genevieve

Disbursement Request Form

Disbursement of \$500 or Greater Request Form

On _____, _____
(today's date) (name of parish organization)

requests to make a disbursement of _____ to
(amount requested)

(name of payee)

Please state reason for disbursement:

_____ approved _____ not approved

(pastor signature) (date)

Reason for "not approved" (if applicable):
