



THE DIOCESE  
*of*  
**BUFFALO**

## *Parish Capital Expenditure Request*

Date: \_\_\_\_\_

Project Number: \_\_\_\_\_  
*Assigned by the Catholic Center*

Parish: \_\_\_\_\_ Family #: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Pastor/Moderator/Administrator: \_\_\_\_\_

Email: \_\_\_\_\_

Project Coordinator: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Please describe the project/nature of the work:

What is the rationale for the project?

What is the estimated cost? **Please attach three (3) bids and indicate the preferred bid.**

How will be the project be funded/source of funds:

What is the estimated timetable for the work to be started and completed?

The following must sign this form indicating that they have been consulted and approve the proposed project:

Pastor/Moderator:	_____	_____	_____
	Signature	Print Name	Date
Parish Trustee:	_____	_____	_____
	Signature	Print Name	Date
Parish Trustee:	_____	_____	_____
	Signature	Print Name	Date
Pastoral Council Chair	_____	_____	_____
	Signature	Print Name	Date
Finance Council Chair	_____	_____	_____
	Signature	Print Name	Date

**PLEASE RETURN COMPLETED FORM AND NECESSARY DOCUMENTATION TO:**

**Steve Bremer**  
[sbremer@buffalodiocese.org](mailto:sbremer@buffalodiocese.org)

**Diocese of Buffalo**  
795 Main Street  
Buffalo, NY 14203