

Expense Reimbursement Request

NAME: _____

DATE: _____

*** NO REIMBURSEMENT WILL BE MADE UNLESS THIS IS COMPLETED IN FULL AND YOU HAVE SECURED APPROVAL BY THE COMMITTEE CHAIR AND A BOARD MEMBER *If needed, this can be done by email and then printed with reimbursement.**

4 Digit Account number (shown Below)	Vendor	Purpose for Expense	Amount
TOTAL			

Committee Chair approval: _____

Date: _____

Approved (Board Member): _____

Date: _____

Notes:

Committee Expenses as Budgeted

5153	Choir Director Prof. Expenses
6312	Social Media (FB Boosts & Meetup)
6324	Pamphlets & Literature
6340	New Member Functions
6341	Welcoming Congregation
6350	Social Event Expenses
6620	Social Justice Expenses
6703	Other Worship Expenses
6850	Music Purchases
6860	Piano Maintenance
6900	Caring Committee

Children's RE Expenses as Budgeted

5125	DRE Professional Expenses
6160	Children's Curriculum & Resources
6170	Consumable Supplies
6180	Teacher Training & Support
6190	Other Children's RE Expenses
Office Codes as Budgeted/Billed to Office CC	
5138	Church Admin Prof. Expenses
5322	Copying
5325	Postage
5335	Office Supplies & Misc.
6310	Website Expenses