

Expenditure Form

(Request for Purchase, Reimbursement or Payment)

Faith Free Church

Your Name: _____

Date: _____

1. Circle one: Request a *payment to person or vendor*
reimbursement to person for a purchase
purchase of product
2. Indicate Budget Category Number: **(must be completed)** _____
Budget category numbers can be found in the orange folder in the office.

3. Team Leader name: _____

Indicate if Team Leader has been notified: Circle Yes No

4. Describe the purpose and the dollar amount of this expenditure:

Dollar amount: _____

Purpose: _____

- Attach receipt, invoice, bill or other documentation for purchase
- For purchasing agent to order attach Purchase Order
- For reimbursement or payment supply name and complete address for check below: _____

Complete and place in mailbox of the Office Administrator (in the marked manila folder).

Note: The office needs a lead time of TWO WEEKS to make payments (unless other planned or planned in advance). Do not make last-minute expenditure forms. To get a payment made sooner, contact Mike Isenberger for approval.

FOR OFFICE USE ONLY: If an order, date ordered:

If a payment: Check number: _____ Amount: _____

If a church credit card or debit card used: