

# Explanation of Receipt(s) for Reimbursement or Check Request

When completed, please submit this page and the receipt to the Treasurer.

**Your Information**

CHECK Number:	
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Your Name: \_\_\_\_\_

Ministry / Department: \_\_\_\_\_

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

*Staple Receipt to the Back*

**Reimbursements**

Check Payable to: \_\_\_\_\_

**Check Request**

Check Payable to: \_\_\_\_\_

Reimbursed Amount: \_\_\_\_\_

What are you going to purchase:

**Receipt Information**

Please break down what was purchased on the receipt(s) into the categories below

Purchased Categories/Amounts

Adult Sunday School	
Men's Ministry	
Women's Ministry	
Marriage & Family	
Youth Group	
Children's Ministry	
Vacation Bible School	
Nursery Supplies:	
Books & Magazines	

Food:	
Marketing & Advertising	
Worship Team	
CDs	
Flowers	
Gifts	
Graduation	
Office Supplies	
Stamps	
Church Decorations	
Kitchen, Bathroom, & Cleaning Supplies	

Printed Materials:	
Hired Childcare:	
Food Preparer Fee:	
Hotel Rooms:	
Rent of Building:	
Extra Cleaning of Church:	
Table Linens:	
Other:	

There should some form of budget or approximate amount for every event that needs funding.

**Please describe what you purchased and why. Use your best handwriting!**

**If no receipt is present fill out below**

Store Purchased From: \_\_\_\_\_

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

Purchased Items: \_\_\_\_\_

Why don't you have a receipt: