

FINANCE & STEWARDSHIP

Reimbursement Request

REQUEST TYPE

☐ Reimbursement

☐ Missing receipt

Please attach all receipts to this form.

01 PURCHASER

PURCHASER

VENDOR

DATE

ADDRESS

EMAIL

PHONE

02 ITEMS PURCHASED

ITEM(S) PURCHASED

PURPOSE

COST (\$)

TOTAL (\$)

03 APPROVALS

PURCHASER NAME

SIGNATURE

STEWARDSHIP TEAM MEMBER NAME

SIGNATURE

PASTOR NAME · REIMBURSEMENT ONLY

SIGNATURE