## **GRACE COMMUNITY CHURCH**

## EXPENDITURE REQUEST FORM

Section I:				
Requestors Name:		Date of Rec	Date of Request:	
(*Estimate Amount requested: \$		) Date of Eve		
Total Actual Amount: \$		Ministry ac		
•				
Attachments (circle	one): Original Receipt	s * <u>Proposal</u> (Attach pro	oposal of expenditures ) <u>N/A</u>	
(Proposed) Method of Payment (check one):		Church Credit C Will be billed to	Individual purchase & request for reimbursement Church Credit Card Will be billed to Church	
		HECK REQUEST		
Section II: (This sec	tion must be completed	l in full)		
Check should	d be made out to (Pleas	e PRINT):		
Name:				
(Circle One)	Pick Up at church	<u>Mail</u> to:		
	FOR	OFFICE USE ONLY		
Approved by:			Date:	
	Name:			
Seconded by:	Name:		Date:	
Ministry Account (actual):		Check Number:		
		Date Issued:		
		Issued by:		