Celebration Lutheran Church Expense / Reimbursement Form

Date of Request:	Expense / Re	eimbursement Form	
Payable to (include address if check to be mailed)		Notes or special instructions:	
Requested By		Issue Check	
Authorized By (Print and Sign)*		Match to Credit Card Charge (Charge Date)
*Authorizing Person must be appropriate commi	ttee chair, Treasurer, Pre	esident, or Vice President	
100 Administrative		500 Salaries and Benefits	σ - 0
Postage	\$	Pastor Auto Allowance \$	
Quickbooks Charges	\$	Pastor Continuing Ed \$	e e items tracked
Software	\$	Bookkeeping Services \$	e Lu
Supplies - Office	\$	Child Care \$	is to be used for all credit card charges, experon-regular expenses to be charged to budget li Please include instructions to the bookkeepers for a specific event or activity so that it can b
200 Christian Education		Custodial Service \$	S, e oud
Sunday School	\$	Music Director Sundays \$	arges, et to buc
VBS	\$	Music Director Special Services \$	cha ed t e b
Confirmation	\$	Saturday Night Service Leader \$	rd or argo the sty s
Misc Youth Activities	\$	600 Social Concerns	dit card ch be charged ons to the activity so
400 Property		Misc Social Concerns \$	This form is to be used for all credit card charges, its, and non-regular expenses to be charged to buccounts. Please include instructions to the bookk ie check is for a specific event or activity so that it
Building Maintenance and Repair - Interior	\$	700 Stewardship	be used for all cre gular expenses to se include instructi
Building Maintenance and Repair - Exterior	\$	Local Benevolence \$	r al nse
Cleaning Supplies	\$	Synod Assembly \$	d fo
AV System upgrade	\$	800 Witness & Evangelism	usec r ex cluc
Copier	\$	Advertising \$	ular ular i inc
Insurance - Property	\$	900 Worship & Music	s form is to be us and non-regular unts. Please included heck is for a spec
Insurance Auto	\$	Devotionals \$	n is on-
Pest Control	\$	Flowers \$	d no
Cable	\$	Licensing \$	is for
Electricity	\$	Music supplies \$	This form is to and non-reaccounts. Pleathe check is for
Garbage	\$	Visiting Muscians \$	
Gas	\$	Worship Supplies \$	t ion rser
Telephone	\$	Dedicated / Restricted Account	"uct Ibur edic
Water	\$	Account:	Instructions: This form reimbursements, and nor dedicated accounts.
Van Expense	\$	\$\$	= = 0

Bookkeeper / Treasurer Record:

Check Number:_____

Paid Date_____