

REIMBURSEMENT FORM

Kennewick First United Methodist Church
Expenditure Authorization Form

Persons incurring or authorizing an expense on behalf of the Church without prior written approval may be personally liable for the expense.

Person Proposing Expenditure _____ Date _____

On behalf of which Committee _____

Description of Expenditure _____

Provider of Goods or Services: _____

Their Address: _____

Their Phone #: _____

To be assigned to: General Fund Transitory BM &R Memorial
(Check One)

Fund Account Number or Name

Estimated Cost

Payment Method
(Check One)

Provider will bill

I will pay and seek reimbursement (See procedures below)

Ordering Procedure
(Check One)

I will order the goods or services by phone, if given approval. (Write details in the 'Special Notes' area below.)

I will obtain the materials personally and charge them to the Church, if given approval prior to purchase.

Approving signature:

_____ Date: _____

**Copy to bookkeeper: (Approving person or proposer may want a copy also.)

Special Notes:

Reimbursement procedures: When purchases are made or services paid for by an individual Church member, a copy of the bill of sale or credit card charge slip showing all items or services paid for must be presented to the bookkeeper within 3 weeks. If there was a prior authorization on this form to incur the charge, the individual will be reimbursed. 8.16.06