

Christ Lutheran Church Reimbursement Form

For reimbursement of expenses pertaining to Christ Lutheran Church, please complete this form and place it into the Treasurer's mailbox in the Church Office.

Name:

Phone:

Date:

Address:

Budget Area (please check one for each reimbursement)

Item Purchased	\$ Amount	Pastoral Support	Internship	Admin.	Christian Ed.	Evangelism	Fellowship	Finance & Stewardsh.	Property	Social Ministry	Worship & Music	Youth
TOTAL REIMBURSEMENT												

Treasurer's Use Only:

Check #: _____ Date of Check: _____ Check Amount: _____

Recipient of Check: _____ Delivered via: Mail In Person