



UNIVERSITY
UNITARIAN
CHURCH

PROGRAM EXPENSE REIMBURSEMENT OR CHECK REQUEST

Please complete the following form to document any approved expenses incurred or planned on behalf of a program of the church. Indicate how much was or shall be paid for each expense and attach all receipts, agreements, or unpaid invoices to this complete report. Submit for director of minister review and approval for accounts payable.

Date: _____ Amount: _____

Purpose: _____

Program: _____ Code: _____
Not for accounts ending in .506#

Payee: _____

Mail to: _____

Leave in staff/committee box: _____

ACH (staff payee only)

Requested By (name/telephone): _____

Approved By (Minister/Director): _____
Signature ("approved by" signer cannot be the same as payee)