

**EXPENSE REPORTING FORM
FOR EAST LAKE ROAD ALLIANCE CHURCH**

To submit a bill for payment or reimbursement, please fill in the information below and place in Lou Sanchez's mailbox.

Expenses cannot be paid without prior approval from the Ministry Leader.

Be sure to attach all receipts. A check will be sent to the address provided.

Date Submitted: _____ Phone: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Listed below are expenses incurred in the ministry of East Lake Road Alliance Church. Please handle them as follows:

- I am ordering these items now. A bill will be sent directly to the church.
- I have already paid this bill(s), please reimburse the full amount with a check made out to me.
- I have already paid the bill(s) and I would like to have this amount credited to my giving record for this year.
- The bill(s) has not been paid. Please send check to the vendor.

Date Expense Incurred or Payment Due	Vendor/Description	Budget Category	Approved by	Amount
			TOTAL	

Signature: _____

For office use only: Date Paid: _____ Check Number: _____