Regular Arkansas Baptist Convention, Inc. P.O. Box 2736 Pine Bluff, Arkansas 71613



Guidelines for Disbursement/Reimbursement

(Accepted 17 February 2007)

- 1. Requests for expenditure must be made at least one (1) month in advance.
- 2. All expenses incurred must be directly related to Regular Arkansas Baptist Convention work.
- 3. Expenses exceeding \$50.00 must be approved in advance if reimbursement is expected.
- 4. Receipts must be provided within thirty (30) days for all expense advances for meetings, except per diem. Per diem allowance will be \$30.00 per day. (Note: No mileage will be given for use of personal automobiles.) If the previous expense has not been reconciled, no further expense advances will be made.
- 5. All requisitions must be signed by the department head or his/her authorized representative and submitted to the Executive Secretary.
- 6. No contracts should be entered into without prior approval from the president or his designated/appointed representative.
- 7. Every effort should be made for expenses to be paid to the vendor.

Instructions for completing the form

- 1. The quantity is the number of items requested. As regards to hotel, you should indicate the number of nights you are to be staying, etc.
- 2. The description is the item itself: Room, Board, Travel, Registration, etc.
- 3. The unit price is the amount per item. As related to hotel, indicate the room rate per night; as related to per diem, the rate per day; etc.
- 4. The line total is the quantity times the unit price.
- 5. Each item should be listed separately.



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Requisition

(Please Read the Guidelines and Instructions on the Reverse Side)

Date:

Make Check Payable to: (include the mailing Address, if to be mailed Directly to the provider.)

Purpose of the Disbursement:

Auxiliary or Committee to be Charged:

| QUANTITY | DESCRIPTION | UNIT PRICE | LINE TOTAL |
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| Total Amount of the Request | | | |

Requested By:

Signature of Auxiliary/Committee Head:

Do Not Write Below This Line (This section is for use by the Executive Secretary)

Date Received: ______Approved by: _____