



The Episcopal Church of the Epiphany

PARISHIONER EXPENSE REIMBURSEMENT FORM

If you would like the check mailed to yourself or another party, please address an envelope and attach it to the form.

MAKE CHECK PAYABLE TO: (fill out an envelope if you want it mailed to you) _____

DATE	Where the purchase was made	Purpose of the expenditure	Amount	Ministry to be charged
Total of above expenses				

- NOTES:**
1. All expenses must be properly documented
 2. Parishioner expenses must be submitted within 45 days of expenditure
 3. Receipts required for all Credit Card expenses
 4. Receipt required on all Cash expenditures greater than \$25
 5. Certain expense levels require pre-approval – please review expense policy document prior to incurring expense
 6. Please include a self-addressed envelope so that the check may be mailed to you.

Parishioner signature: _____

Rector approval: _____
(if via email, attach copy of email)

Date: _____