DATE _____

WHEATLAND CHRISTIAN CHURCH EXPENSE VOUCHER

Ministry Department: _____

(One Ministry per Voucher)

DATE	PURPOSE OF EXPENSE	CHARGE TO CHURCH CREDIT CARD	CHARGE TO CHURCH ACCOUNT	PAID PERSONALLY REIMBURSEMENT REQUESTED	PAID PERSONALLY DONATION	TOTAL

PLEASE ATTACH RECEIPTS TO VOUCHER

Submitted By

GRAND TOTAL: _____

SIGNATURE_____

Approved By Ministry Chairman:

SIGNATURE_____