

GREFC Reimbursement Form

Your Name: _____ Today's Date: _____

Which Ministry/Area is the purchase for? (please check)

Adult: Connecting & Hospitality Caring & Support Library Men's Women's
 Worship Grandparenting Young Adult

Children's: Nursery Pathfinders Kidz ROC Summer Ministry Camp Scholarships
 Ministry Expense Supplies

Student: Jr & Sr. High Ministry Expense Other

Elders: Background Checks Blessing Guest Speakers Training/Equipping
 Communion Supplies Misc./Other

Facility: Decorating Furnishings Insurance Kitchen Supplies Kitchen Equipment
 Wed. Night Meals Carpet cleaning Cleaning supplies
 Snowplowing General

Office: Copiers/Maint./Toner/etc. Technology Services Equipment/Computers
 Communications Postage General Office Supplies

Staff: Conferences/Cont. Ed.

If Other, please explain: _____

Please explain what you purchased and why: _____

If you ordered online or by phone, was the item received? YES NO

(If NO, please contact the office to process reimbursement once item is received)

Total Amount of Purchase: _____

Please attach all receipts/invoices. If receipt/invoice contains non-ministry purchases, please clearly identify which items are to be charged to the ministry/area for reimbursement. You will not get reimbursed if you do not have an attached receipt/invoice.

Authorizing Signature: _____

Form must be signed by a Ministry Leader/Elder Board Member/Exec Board Member/Pastor. The person requesting reimbursement **cannot** be the authorizing signer.

Please submit form to the Church Office or place in the Office Mailbox.