



BEN WASHINGTON BAPTIST CHURCH
3901 Frisco Avenue • Irving TX 75061
Phone: (972) 790-8421 • Fax: (972) 986-6590

EXPENSE REIMBURSEMENT

Requested By: _____ Date: _____

Ministry/Department: _____

Purpose: _____

	DESCRIPTION	UNIT	UNIT PRICE	TOTAL
1.				
2.				
3.				
4.				
5.				

Budgeted Item: Yes No Receipts Attached: Yes No

If No, Explain: _____

Line Item No.: _____ Amount: \$ _____ Line Item No.: _____ Amount: \$ _____

Payee: _____

Address (if to be mailed): _____

APPROVALS

Ministry Leader: _____ Date: _____

Finance Chairman: _____ Date: _____

NOTE: Pastor Signature Required for Office Expsnes Over \$300 and Other Expenses \$100 and Over

Pastor: _____ Date: _____

Treasurer: _____ Check No.: _____ Amount: _____ Date: _____

White - File Yellow - Treasurer Pink - Ministry