

Palos Verdes Baptist Church

Expense Advance / Reimbursement Request

Requestor: Please complete this section		
Date	<input type="checkbox"/> Advance	Amount
Requestor <i>(Name of person to be paid)</i>	<input type="checkbox"/> Reimbursement (attach receipts) <input type="checkbox"/> Receipts for spending against advance	
Expense Description		

Approvers: Please complete this section			
1 st Approval	Date	Department	Budget Category
(Print name and Sign)			
2 nd Approval <i>(Required for expenses > \$250)</i>	Date	Department	Budget Category
(Print name and Sign)			

Finance Department Action		
Check Number	Amount	Notes

Version 08/13/2013

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