

GRACE FAMILY CHURCH

7031 Watt Ave, North Highlands, CA 95660

MANUAL RECEIPTS SUBMITTAL

Use this form for expenses/purchases where receipts are missing or unavailable

Date of Request	Contact Name	Contact Phone Number

The following expenses were incurred while on church business where the receipts are missing or unavailable:

Expense date	Amount	Detail of Expense

I affirm the above expenses are legitimate and were incurred while on church business:

Employee/Recipient signature: _____ DATE: _____

Authorization is hereby given for reimbursement of the above expenses, without receipts, as listed on the Employee/Recipient Expenses summary:

Administrator Signature: _____ DATE: _____