

**REQUEST FOR REIMBURSEMENT/VENDOR PAYMENT FROM PPC****STAFF USE ONLY: TO USE WHEN SUBMITTING A RECEIPT FOR PAYMENT FROM A PPC CREDIT CARD**

Amount: \_\_\_\_\_  
 Date of Submission of this Form: \_\_\_\_\_  
 Vendor/Reimbursement Payable to : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Mail Check to (address): \_\_\_\_\_  
 Leave in mailbox of \_\_\_\_\_ for pickup at church

Amount: \_\_\_\_\_  
 Date of Charge: \_\_\_\_\_  
 Payee Name: (must submit receipt) \_\_\_\_\_  
 \_\_\_\_\_  
**PPC Credit Card Owner (please circle one)**  
 Pastor Emily, Jeanne, Tom, Chris, Lindsay

**Required Information for All**

*Reason for Disbursement/Credit Card Charge (what was purchased, why, other notation)*

**REQUIRED – Please circle committee and category (if no appropriate category, please write in)**

**Administrative Service (choose one below):**  
*Office Equip - contracts Telephone/Cell/DSL*  
*Office Supplies Credit Card/Bank Fees*  
*Postage Tech Support*  
*Copying*

**Mission (choose one below):**  
*Session Directed*  
*Minister's Discretionary*

**Christian Education (choose one below):**  
*Supplies Youth Ministry*  
*Program Resources Kids Camp*  
*Children's Curriculum Reformed Institute*  
*Youth Curriculum Confirmation*  
*Adult Study Groups Kick off Sunday*  
*Teacher/ Officer Training Women's Retreat*  
*Guest Speaker Honorarium Children's Teacher*  
*Library*

**Property (choose one below):**  
*Insurance RE Taxes and FFB*  
*Fuel Supplies*  
*Water and Sewer R & M-Regular*  
*Electricity Exterminator*  
*Landscaping/Snow Removal*  
*Custodial Services*

**Worship (choose one below):**  
*Supplies Flowers*  
*Pulpit Supply Section Leaders*  
*Substitute Organists Supplemental Musicians*  
*Music*

**Board of Deacons (choose one below):**  
*Fellowship Congregational Care*  
*Kitchen Deacon Events*

Personnel  
*Continuing Education (who \_\_\_\_\_)*  
*Staff Expense (who \_\_\_\_\_)*  
*Book Allowance (who \_\_\_\_\_)*

Finance Committee  
 Endowment Expenses  
 Safe Church  
 Annual Mission Trip  
 Memorials (who \_\_\_\_\_)  
 Memorial Garden

Stephen Ministry  
 Endowment Funds (who \_\_\_\_\_)  
 Misc (specify) \_\_\_\_\_

**All expenses need to be authorized by the committee chairperson**

Committee Chairperson Signature: \_\_\_\_\_  
 Christian Education, *Stephanie Hampton*; Mission, *Julie McMahan*; Property, *Steve Dorman*; Finance, *Leslie Kerr*; Worship, *Chidi Obasi*; Congregational Care, *Cal Reid*; Fellowship, *Penny Coco-Boyd*; Endowment, *Chris Dowd*; Memorial Garden, *Mary Margaret Smith*; Personnel, *John Sohl*; Stephen Ministry, *Sherry Johnson*; Deacons, *Wendy Kuhn*

Please Note: All Requisitions for Payment must have a receipt attached; **no more than 45 days after the date of the expense but no later than December 31st of that year.** Exceptions- Pastor/ Finance Ch. You must select a committee for categorizing the expense. All expenses need to be authorized by the committee chairperson. Please make a copy and place in LINDSAY CHAPIN'S MAILBOX.

**2022 Expense Form**