

JourneyEC Expenditure Reimbursement Form

Revised October 2018

Procedures for submitting reimbursement requests for JourneyEC expenses:

1. Enter the **Budget Line Number** & Line Item Name for expense per Journey Chart
2. Enter brief Item Description & Amount.
3. Enter Total Amount to be Paid.
4. Enter name for Check Payable to.
5. Complete Address (if check is to be mailed).
6. Enter any Special Instruction/Comments, if needed.
7. Sign by Dept. leader, date and attach **ORIGINAL** receipts and/or invoices to form.
If there is no receipt/invoice attached, state reason in the Comments.
8. Obtain Elder/Senior Pastor **signature** verifying expense, if the request is \$250 or more then a second signature is required.
9. Place completed form and receipt(s), in the JourneyEC Bookkeeper mail box.
10. Reimbursements must be submitted within 90 days of purchase; with the exception of the last fiscal quarter all receipts must be turned in by Dec. 31st.
11. Cost to issue a stop payment and create new check = \$30.
(Please allow **two weeks** processing time.)

Note: To follow IRS ruling, if you wish to donate your physical contribution to JourneyEC. Please deposit your reimbursement check and write another check with your offering to JourneyEC.

<u>Line No.</u>	<u>Line Item Name</u>	<u>Item Description</u>	<u>Amount</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Amount to be Paid			_____

Check Payable to:	Name
Complete if check is to be mailed:	Address
	City, State, Zip
	Phone ()

Special Instructions/Comments:

Department's Signature:		Date:	
	signature / print name		

Approved Elder/ Senior Pastor Signature:		Date:	
	signature / print name		

Office Use Only:		
Date Paid:	Check Number:	

