Expense For: Reimbursement TO BE PAID Credit Card Receipt

(circle one - attach applicable receipt/s)

Your Name:
Vendor Name:
Expense Purpose:
Amount:

Check applicable budget line item/s **OR** **Applicable Fund**

Bathroom Supplies ☐

Cleaning Supplies ☐

Discipleship

Choose One: Discipletown ☐
EQUIP ☐
Leadership Pipeline ☐
Men's Ministry ☐
Prayer Ministry ☐
Visitation Ministry Exp ☐
Welcome Supplies ☐

Hospitality

Choose One: Kitchen Supplies ☐
Other Supplies As Needed ☐

Office Expenses

Choose One: Computer Hardware ☐
Software/Subscriptions ☐
Office Supplies ☐

Outreach/Evangelism

Big Days

Choose One: Christmas ☐
Easter ☐
Summer Kick-Off Cookout ☐
I ♥ My Church Sunday ☐
Other (Specify) ☐

Christianity Explored ☐

Community Events/Evangelism ☐

Vacation Bible School (VBS) ☐

Property Maintenance ☐

Specify:

Technology

Choose One: Network Services ☐
Website/CMS ☐

Worship

Choose One: Communion Supplies ☐
Sanctuary Supplies ☐
Worship Team ☐

Biblical Counseling Fund ☐

Capital Improvements Fund ☐

Deacon's Fund ☐

Evangelism Fund ☐

Flower Fund ☐

Leadership Development Fund ☐

Memorial Fund ☐

Music Fund ☐

OCC Shoebox Fund ☐

Pulpit Fund ☐

Women's Ministry Fund ☐

Youth Ministry Fund ☐

NOTES: