

**Presbyterian Church of the Roses
Expenditure Voucher**

Name: _____ Address: _____ City & Zip: _____	<input type="checkbox"/> Mail <input type="checkbox"/> put in box <input type="checkbox"/> other - see comments	Date
Description of product or Reason for Reimbursemen		Amount
Approved by		Total
Request by:	Account #	<small>circle one</small> Budget Non-Budget
Committee:	Account Name	
Comments:		