

## Presbytery of the Pacific Southwest

Request for Expenditures and Reimbursements

Supporting documentation (i.e. receipts) must be attached to request. All requests should be mailed to Cathy Cole, Presbytery Assistant, at the Presbytery Office:

5770 Carlson Drive, Sacramento, CA 95819 or cathy@epcpops.org.

TODAY'S DATE:	REQUESTED BY:		REQUES	REQUESTOR EMAIL:			
CHECK AMOUNT:		DATE REQUIRED:	REQUES	ESTOR PHONE NUMBER:			
PAYABLE TO:		l		1099	Yes 🗖	No 🗌	
MAIL DIRECT TO: N	IAME						
Address: (Street) (City/State/Zip Code							
DESCRIPTION: (ATTA	CH ALL RECEIPTS)						
TRAVEL EXPENSE SU	IMMARY (Аттасн	ALL RECEIPTS) USE A SING	GLE REQUEST FOR EAC	CH TRIP			
	AMOUNT	COMMENT/ADDITIONAL INFORMAT					
Airfare							
MILEAGE		MILES @ \$.70 PEF	R MILE =				
RENTAL CAR							
Parking							
Lodging							
MEALS							
Other							
Other							
TOTAL							
TREASURER USE ON	ILY						
ACCOUNT NAME					AMOUNT		
					TOTAL:		
AUTHORIZED BY:					DATE:		