

REIMBURSEMENT REQUEST FORM

SUBMITTED BY	
DATE	
TOTAL AMOUNT	
APPROVED BY	
CHECK NUMBER	
DATE PAID	

Codes	Description	Amount	Purpose of Expenditure
	Cost Of Goods Sold		
	Medical Reimbursements		
	Brochures, Pamphlets, Printed Material		
	Mailing List Postage		
	Newsletter		
	Computer		
	Dues And Subscriptions		
	Journals, Books, Tapes, Literature		
	Office Supplies		
	Parking		
	Postage - General		
	Reproduction, Copies		
	Stationary, Business Forms		
	Telephone, Fax		
	Lodging		
	Meals		
	Mileage		
	Transportation		
	Vehicle Allowance		
	Vehicle Insurance		
	Vehicle Maintain and Repair		
	Gifts And Volunteer Appreciation		
	Gifts - Other Individuals		

	Shabbat School		
	Music Supplies		
	Food For Services And Meetings		
	Worship Team		
	Education		
	Seder		
	Total		