ITEMIZED EXPENDITURE FORM

Complete this Form and return to THE FINANCE MINISTRY on: ____________________.

***ATTACH ALL RECEIPTS***

Requesting Ministry: ___________________________ Date of Check: ________________

<table>
<thead>
<tr>
<th>LIST OF EXPENSES</th>
<th>AMOUNT</th>
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(1) CHECK AMOUNT $____________

(2) TOTAL EXPENSES $____________

(1) minus (2) = BALANCE $____________

Amount Owed to Church $____________

Amount Owed from Church $____________ (Minister Leader MUST Approve)

SIGNATURE OF MINISTER LEADER: ____________________________________________

DATE SIGNED: ____________________

FINANCE MINISTRY APPROVAL:

SIGNATURE: ___________________________ DATE SIGNED: ________________

AMOUNT DISBURSED: _______________ DATE CHECK MAILED: ________________

CHECK RECEIVED BY: ___________________________ DATE: ________________

Revised 11.2013