

MAPLE SPRINGS BAPTIST CHURCH

4131 Belt Road
Capitol Heights, MD 20743

ITEMIZED EXPENDITURE FORM

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

***** ATTACH ALL RECEIPTS *****

Requesting Ministry: _____ Date of Check: _____

(1) CHECK AMOUNT \$ _____

LIST OF EXPENSES	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: _____

TO BE COMPLETED BY FINANCE MINISTRY ONLY

FINANCE MINISTRY APPROVAL:

SIGNATURE: _____ DATE SIGNED: _____

AMOUNT DISBURSED: _____ DATE CHECK MAILED: _____

CHECK RECEIVED BY: _____ DATE: _____