

CHECK #: _____

TO: _____

Staff, Work Area, or Committee Chairpersons,
please sign and return to the Church Office.

If you have any questions, please contact:
Kristy Teska at 785-841-7500

EXPENSE VOUCHER
FIRST UNITED METHODIST CHURCH
946 VERMONT ST LAWRENCE, KS 66044
867 HWY. 40 LAWRENCE, KS 66049

DATE: _____ FUND: _____

PAY TO: _____

ADDRESS: _____

DESCRIPTION	COST
TOTAL COST	

COMMITTEE CHAIR SIGNATURE

CHURCH STAFF SIGNATURE

COMMITTEE CHAIR SIGNATURE

FINANCE COMMITTEE CHAIR

To be signed only when total cost exceeds \$500.00