

Westside Unitarian Universalist Church
Church Expenses – Church Year 2009-2010 (July 1st, 2009 – June 30th, 2010)

Date: _____

To: Bob Rake, Treasurer

The following expense(s) have already been paid. Receipt(s) attached. Please apply this expense to the following line items in the budget:

- | | | |
|-------------------------------------------------------|----------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Committee—Finance | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Childcare | <input type="checkbox"/> Committee—Green Sanctuary | <input type="checkbox"/> Office Supplies |
| <input type="checkbox"/> Committee—Adult RE | <input type="checkbox"/> Committee—Membership | <input type="checkbox"/> Postage—General |
| <input type="checkbox"/> Committee—Aesth and Building | <input type="checkbox"/> Committee—Social | <input type="checkbox"/> Kitchen/Bathroom Supplies |
| <input type="checkbox"/> Committee—Building | <input type="checkbox"/> Committee—Social Justice | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Committee—Caring Umbrella | <input type="checkbox"/> Committee—Stewardship | |
| <input type="checkbox"/> Committee—Children’s RE | <input type="checkbox"/> Committee—Worship/Music | |

| Date | Committee | Item/Purpose | Total |
|-------|-----------|--------------|-------|
| | | | |
| | | | |
| | | | |
| | | | |
| Total | | | |

- Please reimburse me. I do not wish to be reimbursed. Please consider this expense a donation.

Signature

If needed, Committee Chair Approval/Date Signed

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