



PLEASE SEND REIMBURSEMENT TO :

Name _____ Today's Date _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

PURCHASE INFORMATION (receipts must be provided)

Item(s) Purchased	Ministry/Purpose/Event	Store	Amount
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

TOTAL AMOUNT
\$ _____

APPROVAL SIGNATURES :

Ministry Leader _____ Staff _____ Date _____

FOR OFFICE USE :

Check Number _____ Date Issued _____

Please submit completed form **with receipt(s) attached** to Vicki Nishioka at Victory Fellowship.

Please allow 1-2 weeks for processing. Thank you.