PURCHASE REQUEST & REIMBURSEMENT FORM

All purchase requests and reimbursements must fall within annual budget limits as prescribed at the start of each fiscal year. Any request or reimbursement for funds not already budgeted is not guaranteed and must be approved by the Pastor of Administration and in some instances by the Board of Trustees.

Name _____ **Ministry Department** _____

PAYMENT TYPE ☐Used Personal Funds (Reimbursement) ☐Check Request ☐Other
☐Missions Account Transaction Authorization ☐COTRH Debit Card

Reimbursements must be submitted within 60 days of receipt date

ITEM INFORMATION

DATE	VENDOR	ITEM DESCRIPTION	ACCOUNT	COST

Total:

Ministry Leader Signature_____ Date_____

Pay to the Order of: _____

Address _____
Street City State Zip

AUTHORIZATION INFORMATION

Pastor of Administration's Signature _____ Date _____
**Only necessary for purchases more than $500*

64900 – Office Supplies	**70005 – First Look + Nursery**	**70020 – Youth Ministry**
67800 – Small Tools + Equipment	**70006 – Fresh Start**	**72600 – Summer Camp**
70001 – 252 Expenses	**70015 – Tuesday Training**	**72700 – Leadership + Fellowship**
70002 – Celebration Service	**70018 – Women's Ministry**	**73320 – Relief + Rehab**
70004 – Coffee + Info Supplies	**70019 – Worship Ministry**	**78100 – Staff Meetings**

If your account code isn't listed, please consult the account list at the COTRH Office.