## Saint Matthias Anglican Church **Expense Reimbursement Form**

Phone:

Your Name:

Address:		City	Ζıp
Date of Purchase	Item(s) Purchased	Purpose	Amount
TOTAL:			AL:

To be reimbursed you <u>MUST</u> attach an original or a copy of your receipt.

For Office Use Only				
Approved by: Amount:		Account to Debit:		

Please **submit** hard copy of the completed form and receipt(s) to Fr John or Traci Yazembiak (Parish Treasurer) OR email to one of them (at <a href="revjohnroberts@gmail.com">revjohnroberts@gmail.com</a> or <a href="tyazco65@gmail.com">tyazco65@gmail.com</a> respectively) and expect confirmation to confirm that it has been received and will be processed.