

## Tahlequah Ward Expense Authorization Form

Date Paid: \_\_\_\_\_

Check Number: \_\_\_\_\_

Requester's Name: \_\_\_\_\_

Make Check

Payable To: \_\_\_\_\_

Mailing

Address: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

This request is: ☐ a reimbursement ☐ an advance payment

Source of Funds:

☐ BUDGET: \_\_\_\_\_  
Organization

☐ OTHER: \_\_\_\_\_  
(Boy Scout camp, Cub Scout camp, YW camp)

☐ FAST OFFERINGS: \_\_\_\_\_ ☐ Needs & Resource Analysis on file  
Category

Explain what the funds were used for: \_\_\_\_\_

\_\_\_\_\_

Receipts Attached: ☐ Yes ☐ No If receipts not attached, explain why: \_\_\_\_\_

\_\_\_\_\_

Requester: \_\_\_\_\_

Signature

Date

Approval, Organization Head: \_\_\_\_\_

Signature

Date

Approval, Bishop: \_\_\_\_\_

Signature

Date