



Christ Church Episcopal
 5655 North Lake Drive
 Whitefish Bay
 Wisconsin 53217
 414.964.3368
 office@christchurchwfb.org

Check one:

- Reimbursement Request**
Sendik's or Other Charge Usage
In-Kind Contribution

Name and Address [make check payable to]:

Itemization of Expenses

Purchase Date	Account/Ministry to charge (e.g. Altar Guild, Sunday School)	Reason for Purchase	Amount
		TOTAL	

Receipts are required for reimbursement. Please attach receipts to form and submit to Parish Administrator, Bob Staeck, for processing.

Signature: _____

Date Submitted: _____