

# SAVANNAH PRESBYTERY

"Servant Of The Churches"



## VOUCHER FOR NON-TRAVEL EXPENSES

**Make Check Payable To:**

**Date:** \_\_\_\_\_

Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ SSN (if applicable): \_\_\_\_\_

**Request for office supplies and expendable materials, services or equipment:**

Item:	Charge to Budget Line Item:	*Notes:	Amount
<b>Total estimated costs</b>			

*(Please do not purchase items or services before an authorization has been obtained)*

\*Please give a brief explanation of how and where this service or equipment will be used on the back of this sheet if there is not enough room above

Name/Title of Requestor \_\_\_\_\_ date \_\_\_\_\_

\*\*\*\*\*

Payment Authorized by: \_\_\_\_\_ date \_\_\_\_\_

- Executive Presbyter
- Presbytery Treasurer
- Office Manager

Authorizations: The Office Manager may authorize the purchase of office supplies, not to exceed \$250.00. All other expenditures must be authorized by the Executive Presbyter or the Presbytery Treasurer

