

GCC Expense Form

(Members)

Name of Requestor _____

BUDGET LINE	DESCRIPTION	AMOUNT
Curricula and Books (Gifts)		
Curricula and Books (Library)		
Curricula and Books (Music)		
Emergency Action Plan (Audio/Visual)		
Emergency Action Plan (Medical)		
Emergency Action Plan (Physical Security)		
Emergency Action Plan (Training)		
Facilities (Building)		
Facilities (Furniture and Equipment)		
Facilities (Grounds)		
Facilities (Improvements)		
Facilities (Maintenance)		
Facilities (Repairs)		
Meetings (Men)		
Meetings (Women)		
Meetings (Youth)		
Ministry (Nursery)		
Supplies (Office)		
Supplies (Cleaning)		
Supplies (Kitchen)		
Supplies (Other)		
		TOTAL

Signature _____ Date _____

Bookkeeper Use:

Check # _____ Date Paid _____