

# S.A.L.T - Financial Form

For the Month of \_\_\_\_\_ Year \_\_\_\_\_

Person Filling out Report: \_\_\_\_\_

## Flowers

Who received flowers \_\_\_\_\_ \$ Amount \_\_\_\_\_

\_\_\_\_\_ \$ Amount: \_\_\_\_\_

## Receipts:

Item Purchased	\$ Amount	Person to be Reimbursed
_____	_____.	_____
_____	_____.	_____
_____	_____.	_____
_____	_____.	_____
_____	_____.	_____
_____	_____.	_____
_____	_____.	_____
_____	_____.	_____
_____	_____.	_____
_____	_____.	_____
<b>Total</b>	<b>\$ _____.</b>	

Please keep in mind that there is a monthly budget of \$100. Kindly attach all receipts and turn form into the Treasurer.

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### Financial Forms and Budget:

SALT has a monthly budget of \$100. The person in charge can request money at the beginning of the month. At the end of each month please turn in the completed form with all receipts. You will be reimbursed if necessary. Any leftover money is to be returned to Life Group-SALT Budget.