



2023 Payment Voucher Request

For tax and audit purposes, all payment voucher requests must be submitted within 30 days of the expense being incurred. **ALSO, RECEIPTS MUST BE ATTACHED FOR ALL EXPENSES AND A LOG OR TRAVEL DETAILS FOR MILEAGE.**

Date request submitted: _____

Make payment to:

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Expense(s) incurred for:

<input type="checkbox"/>	Leadership Team/ Moderators	<input type="checkbox"/>	Commission on Ministry
<input type="checkbox"/>	Congregational Support Team	<input type="checkbox"/>	Nominating & Representation Committee
<input type="checkbox"/>	Dynamic Leaders Team	<input type="checkbox"/>	Administrative Commission for _____
<input type="checkbox"/>	Mission & Outreach Team	<input type="checkbox"/>	Commission on the Preparation for Ministry
<input type="checkbox"/>	Administration & Support Team	<input type="checkbox"/>	Scholarship/ Grant for _____
<input type="checkbox"/>	Budget & Finance Committee	<input type="checkbox"/>	Other _____

Meeting or event attended _____

Date/time of meeting or event _____ Location _____

Amount Requested

Mileage

_____ miles x 14 cents per mile = _____

Please attach a log indicating date and location of meeting(s) and event(s) and number of miles traveled round-trip by motor vehicle.

Add 2 cents per mile for each rider and list their names here.

_____ **Meals and Lodging** _____

_____ **Postage/ Supplies/ Fax Fees / Etc.** _____

_____ **Other** (Please describe expense.) _____

_____ Total of documented expenses

_____ Less contribution to the presbytery

_____ Total amount of reimbursement request

SEE PAGE 2 FOR INSTRUCTIONS TO GET THE REQUEST APPROVED AND PAID.

I certify that these expenses were incurred as I attended a meeting or event while conducting business for the Presbytery of Lake Michigan.

Signature of person submitting request

Date

I certify that the expenses incurred by the individual submitting this payment request voucher are related to business for the Presbytery of Lake Michigan, and authorize reimbursement of the individual in the amount indicated on this form.

Approval signature of moderator/ facilitator/ authorized person

Date

To get reimbursed for expenses related to Presbytery of Lake Michigan business:

1. **Fill out the payment voucher.** Make sure to include your name and contact information, indicate for what group the expenses were incurred and provide details about the business meeting or event. Missing information means the request will not be processed.
2. **Submit receipts and/ or detailed logs for all expenses.** These may be the original receipts submitted with a paper payment voucher OR scanned electronic copies sent via email as attachments with the electronic payment voucher.
3. **Sign the payment request voucher.** If submitting electronically, please type your name in the fillable cell AND send the electronic file using your regular email to the individual responsible for authorizing the reimbursement.
4. **Submit the payment request voucher to the moderator or facilitator of the group for which the expense was incurred.** Either print the completed form and send or deliver it with the paper receipts to the moderator or facilitator of the group for which the expense was incurred OR send an electronic copy of the reimbursement request and related receipts and documentation via email to the moderator or facilitator for which the expense was incurred.

Moderators must review the information provided on the form to verify dates, amounts, receipts and proper completion of the form then sign and date the form.

- Approved payment vouchers and supporting documentation in **paper form** should be mailed to the Presbytery of Lake Michigan, 1511 Helen Avenue, Portage, MI 49002.
- Approved payment vouchers and supporting documentation in **electronic form** should be sent to bookkeeperplm@gmail.com as an electronic attachment.

THIS IS A FILLABLE .PDF FORM. TO USE IT:

1. Save a copy to your computer using a new file name like "2019.09.25 – *Smith File*". (Change the file name to one you can remember and save it where you can locate it.)
2. Fill in the blank cells by typing the information. Use the tab button to move on to the next field OR left click once on a cell to type info there.
3. Save the file again using the file name you established in step 1.
4. Print a copy of the form to mail or hand deliver and/or send it as an email attachment as instructed on the form. (You also may want to print a copy for your records.)