

2022

PRESBYTERY **FOR** SOUTHERN NEW JERSEY
TREASURER
1701 SYCAMORE STREET
HADDON HEIGHTS, NJ 08035

DISBURSEMENT

No. _____

Check No. _____

Date: _____

Posted: _____

Date: _____

AUTHORIZATION FOR DISBURSEMENT

To the Treasurer _____ DATE: _____

Pay: _____

Description of Disbursement: _____

FUND: _____ Amount: _____

Approval by: (Signature) _____

	DEBIT		CREDIT
ACCOUNT	AMOUNT	ACCOUNT	AMOUNT

REASON FOR DISBURSEMENT: _____

Travel: Date: _____ From: _____ To: _____ (Car) Reason for Trip: _____ # of Miles: _____ @\$0.18 (non-clergy/volunteers) = \$ _____ @\$0.58.5 (clergy or employees) = \$ _____	\$
Travel: Date: _____ Mode of Transportation: _____ From: _____ To: _____ Reason for Trip: _____ (Please include copy of receipt)	\$
Meals: Date: _____ Place: _____ Occasion: _____ # of Persons: _____ (Please include receipts)	\$
Other: Please detail and include appropriate receipts: _____ _____	\$
TOTAL	

Signature: _____ Date: _____ Revised 12/28/2021