

RECD _____ DUE _____ PAID _____ CHECK# _____ VENDOR# _____



2501 Fox Mill Road
Reston, VA 20191

MINISTRY JOURNAL VOUCHER
(Voucher must be submitted within 15 days after purchases.)

PAYEE INFORMATION

Name _____

Address _____

City, State, Zip _____

Accounting Distribution

DATE	ACCOUNT#	DESCRIPTION	AMOUNT

Budgeted Item Yes No

TOTAL _____

Servant Leader Signature _____ Date: _____

Ministry Leader Signature _____ Date: _____

Executive Pastor _____ Date: _____

Reviewed By: _____ Date: _____

Please note: HFC tax status is tax-exempt; therefore, we will not reimburse taxes paid on merchandise or services rendered on behalf of the church. Contact your Ministry Leader or Finance office for the Tax-exempt form.

Revised 8/15/13