

Christ Lutheran Church

Expense Tracker

Today's date: _____

Your name: _____

Vendor: _____

Amount: \$ _____

Did you use your own funds to pay for this merchandise/service?

Circle one: YES (check will be issued to church member/employee listed above)

NO (check will be issued to Vendor)

Summary of item(s) ordered/purchased: _____

Have the items arrived, or services been performed? YES NO

Account(s) to be charged (if known): _____

Please securely attach invoices/receipts/packing slips to this form.

This section to be completed only by the Treasurer

Invoice/Order # _____

CLC Account #: _____

Amount Paid: \$ _____

Check Date: _____

Check #: _____