



# The Presbytery of Carlisle

2601 N. Front St., Harrisburg, PA 17110

Phone: 717-737-6821 | Fax: 717-730-9137 | Web: [www.carlislepby.org](http://www.carlislepby.org)

## Presbytery of Carlisle Expense Voucher

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

### TRAVEL EXPENSES

Total Miles: \_\_\_\_\_ at \_\_\_\_\_ Per mile = \$ \_\_\_\_\_

Tolls (Include Receipts): \_\_\_\_\_ Meals (Include Receipts): \_\_\_\_\_

**Total Travel Expenses:** \_\_\_\_\_

**OTHER EXPENSES (include receipts):** \_\_\_\_\_

**Total Payment Request:** \_\_\_\_\_

### PURPOSE FOR PAYMENT OR PURCHASE (include dates for travel and expenses)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Committee: \_\_\_\_\_ Designated Fund (if any): \_\_\_\_\_

\_\_\_\_\_  
*Name of person submitting voucher*

\_\_\_\_\_  
*Name of authorizing person*

Check payable to: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please complete the full voucher. Email to [bookkeeper@carlislepby.org](mailto:bookkeeper@carlislepby.org).

**FOR INTERNAL USE ONLY:**

Date: \_\_\_\_\_ Authorized by: \_\_\_\_\_

**Expense or Designated Account Codes**

Code #	Category

**Operating Expense Account Numbers**

5100	Personnel Expenses
5400	Transformational Partnerships
6100	Building (Office) Expenses
6200	Office Operations
8000	Committee Expenses

**Designated Funds Account Numbers**

31553	Honduras Partnership
31551	Honduras Co-Worker Support
3153	Peacemaking
3154	Holy Land Travel
3156	Preparation for Ministry
3160	Camp Hill Prison Fund
3204	Legal Reserve
3205	Ministers' Emergency
3207	New Church Development
3216	Small Church Leadership
3219	Ministry and Mission Fund
3227	Healthy Congregations Fund
3228	Church Building Loan Fund
3231	Progress-Immanuel Residual Fund