

DEACON VOUCHER 2016-2017

- COMMUNION SUPPLIES
- EMERGENCY NEEDS
- LOVE INC

DATE _____

DESCRIPTION/PURPOSE _____

TOTAL _____

- RECEIPTS ATTACHED
- CONFIRMING MOTION FROM _____ MEETING ATTACHED
- OTHER: _____

Pay to: _____ OR DC

OFFICE USE ONLY

DEBIT CARD

QB

DC

BHFCU

Chairperson Signature _____

2nd Signature _____

(Required if purchase over \$500)

- Online Yes No
- Taxed Yes No

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