

Sabbath School Reimbursement Form

(Attach Original Receipts)

_____ Expense approved by Sabbath School Superintendent.

_____ Purchaser Name

Expense Category (Check)

Secretary:
_____ SS Quarterly (for all departments)

Adult:
_____ Expenses

_____ Improvements

Cradle Roll:
_____ Expenses

_____ Improvements

Kindergarten:
_____ Expenses

_____ Improvements

Primary:
_____ Expenses

_____ Improvements

Juniors:
_____ Expenses

_____ Improvements

Early Teen:
_____ Expenses

_____ Improvements

Youth:
_____ Expenses

_____ Improvements

Young Adult:
_____ Expenses

_____ Improvements