OVERCOMING CHURCH OF GOD OF AMERICA, INC

Expense Report

Submitted by: (Name & Title)				
Dates: {From}	{To}			
Date Submitted:		Church Department:		
		Amount of Purchases		
Date	Purchase (or) reason for Expense	Estimated amount	Actual Amount without receipt	Amount with receipt (attached to back)
				(11111111111111111111111111111111111111
Column Totals				
Total Amount of Expenses				
Advancement Amount				
Amount of: Rein	Circle One nbursement (or) Payment			
Expense Report Submitted By:		Date:		
Expense Report Approved By:		Date:		