

MATRIMONAL DIALOGUE, INC. - REQUEST FOR REIMBURSEMENT

INSTRUCTIONS: To help comply with the audit rules and regulations of the Internal Revenue Service, please complete and submit this form when requesting reimbursements.

1. Sections A and B must be filled out completely. Please forward form to Executive Couple for approval.
2. After approval is obtained from Executive Couple, forward to Finance Couple for reimbursement.
2. If you wish to donate your expenses or to tithe 10% of your expenses to Marriage Encounter, please attach your check for the amount. Your check is a valid tax deduction for charitable contributions.

SECTION A

NAME: _____ PHONE: _____

STREET: _____

CITY: _____ STATE: _____ ZIP: _____

DATE SUBMITTED: _____ SIGNATURE: _____

SECTION B - Please detail items for each category and attach all receipts to back of form.
(Provide details, comments, and justifications on the reverse side of this form.)

SUPPLIES (Stationary, printing, etc.)

TOTAL SUPPLIES \$ _____

POSTAGE (Packages, pre-stamped envelopes, stamps, etc.)

TOTAL POSTAGE \$ _____

PHONE (Identify charges)

TOTAL PHONE \$ _____

MISCELLANEOUS EXPENDITURES (Identify each)

TOTAL MISCELLANEOUS \$ _____

TOTAL REIMBURSEMENT REQUESTED \$ _____

SECTION C - REQUIRED

EXECUTIVE COUPLE APPROVAL/SIGNATURE _____ DATE: _____

Finance Couple - Date Paid: _____ Amount: \$ _____ Check Number: _____