Falls Road A.M.E Church VOUCHER

Organization:			Invoice Amount:	Invoice Amount: \$		
Vendor:				Date:		
Organization's Head Sig.:				Date:		
Pastor's Signature:				Date:		
Accounting Use only	1		Accounting Use ONLY	Accounting Use Only		
Account:	Descri	ption:	Budget/Jobs Dept.	Class:	Amount:	Check #
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400 Stewards	600 Conference	BUDGET /JOI	1000 Ministries	1300 Outreach		
Clerical, Stewardess	Annual, Church School		C.A.R.E., Class Leaders	BGE, Telephone,		
Death, Food/Beverage,	District, Founder's Day,		Dance, Family Life, Flowers,	Maintenance, Water		
Guest Speakers, Sick & Shut-in,	General, Mid-Year		Lay, Men, Music, Seniors	Director of Finance		
Discretionary			Ushers, Youth, Women,			
			College, Couples, Harvest Pastor's Aid			
500 Pastor Package	700 Trustees		1200 Mortgage			
Class Dues, Housing,	Alarm System, Copier, Custodian,		BGE, Telephone,	Note: Shaded areas of vo		nucher
Vacation, Utilities & Travel,	Grass, Insurance ,Supplies	Grass, Insurance , Supplies		are to be completed by fina		
	Maintenance, Musicians, Snow		Director of Finance			
	Removal, Sound System, Discretionary			and accounting personnel		