

## Expenses Allocation Form for LTSP Credit Cards

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**Instructions:**

1. Complete Name, Department, Date
2. Provide Account/GL Number for each itemized expense allocation
3. Attach applicable invoice/bill and all receipts
4. Attach a check made payable to the vendor for all personal expenses

The Business Office will not be responsible for finance charges incurred if a bill is received past the due date and/or if an expense form is returned for missing information.

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Name \_\_\_\_\_

Department \_\_\_\_\_

Date \_\_\_\_\_

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Account (GL) Number:	Description:	Amount:
	Entertainment	
	Travel	
	Office Supplies	
	Telephone & Fax	
	Professional Fees	
	Synod Meetings	
	Memberships	
	Capital Campaign	
	Sub-Fund	
	Other/Miscellaneous	
	Other/Miscellaneous	
	Other/Miscellaneous	
	Other/Miscellaneous	
	<b>TOTAL</b>	

**Submit completed forms with invoice, receipts, and applicable personal checks to  
Lisa C. Hutchinson, Business Office**