Anglican Diocese of Tasmania

OPERATIONAL FINANCIAL RECORDS

Parish / Organisation _____

Program Name _____

Team Leader _____

Finance Officer _____

FINANCIAL RECORDS

Income	$	Expenditure	$

Invoices attached ☐ Yes
Receipts attached ☐ Yes

Team Leader signature _____

Finance Officer signature _____

Date _____

Reimbursement Details:

Name _____

Address _____

Telephone _____

To be completed by Finance Officer
To be forwarded to:
Team Leader within 2 weeks of completion of event
Ministry Supervisor within 3 weeks of completion of event
Copy to be filed with event records