



**Kairos Check Request Form**

**PROGRAM: Training, Marketing, Weekend, and Post Weekend Expenses**

Advisory Council: \_\_\_\_\_ Weekend #: \_\_\_\_\_ Weekend Dates: \_\_\_\_\_  
 Payee: \_\_\_\_\_ Submission Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_

A check is requested for the following expenses, as supported by the attached itemized receipts and other documentation.

**Is this a reimbursement?**  YES  NO <--check one  
 If NO, attach vendor invoice / bill  
 If YES, attach all receipts

**Was an advance received?**  YES  NO <--check one  
 enter amount--> \$ **0.00**

**WEEKEND EXPENSES**

**DESCRIPTION:**

Agape Expenses	\$	_____	_____
Badges	\$	_____	_____
Decorations	\$	_____	_____
Equipment Rental	\$	_____	_____
Housing/Facility Rental	\$	_____	_____
Insurance	\$	_____	_____
Meals/Food	\$	_____	_____
Pictures/Photos	\$	_____	_____
Postage - Program	\$	_____	_____
Printing/Copies	\$	_____	_____
Promotion/Mailings for Program	\$	_____	_____
Supplies/Paper Products	\$	_____	_____
Travel	\$	_____	_____
Vehicle/Trailer Rental	\$	_____	_____
Vehicle/Trailer Rental Gas	\$	_____	_____
Other (Describe)	\$	_____	_____
Other (Describe)	\$	_____	_____

**POST WEEKEND EXPENSES**

One & Two Day Retreat	\$	_____	_____
Prayer & Share	\$	_____	_____
Reunion	\$	_____	_____
Other (Describe)	\$	_____	_____

**TRAINING EXPENSES**

AKT Travel & Meals	\$	_____	_____
AKT Supplies / Other	\$	_____	_____
Torch 101 Travel & Meals	\$	_____	_____
Torch 101 Supplies / Other	\$	_____	_____

**MARKETING EXPENSES**

Advertising	\$	_____	_____
Marketing/Promo Materials	\$	_____	_____
Newsletter / Postage	\$	_____	_____
Web Expenses	\$	_____	_____

**Total Expenses:** \$ **0.00**

**Less Cash Advance:** \$ **0.00**

**Difference** \$ **0.00**

**Negative Difference?** Please reimburse the unused funds within 30 days of the weekend.

\_\_\_\_\_ signed by person seeking reimbursement

Approved by:

Electronic signatures are acceptable / attach email approval

AC KairosDonor Coor (Model 1) or AC Financial Secretary (Model 2)

**ATTACH ITEMIZED RECEIPTS AND ALL RELATED PROOF OF EXPENSES**

Send Approved form and all related documentation to: **Kairos Toledo Financial Secretary - John Irwin**