Kairos Check Request Form

ADMINISTRATIVE: General Office / Administrative Expenses

Advisory Council: Kairos of Texas **WK #** N/A **WK Dates** N/A

Payee: **Submission Date:**

Address: **Email:**

City, State, Zip: **Phone:**

Is this a reimbursement?	**(Yes or No)**	**If NO, attach vendor invoice.** **If YES, attach itemized receipts. If NO, attach vendor invoice.** **If YES, attach itemized receipts.**		
Was an advance received?	**(Yes or No)**	**$**	**NO**	**If YES, enter amount of advance**

ADMINISTRATIVE EXPENSES: **DESCRIPTION:**

Computer & Software Expenses	$	
Web Solutions Expense	$	
Dues / Subscriptions	$	
Advisory Council Meetings	$	
State Chapter Committee Meetings	$	
Mileage to SCC Meetings	$	**Miles X $0.40/MILE= $ _____**
Office Supplies (ink, pens, paper)	$	**Please put the Dollar Amount Above in**
Postage (IRS letters, admin)	$	**Column "G" to the Right**
ACT Expenses - Meals for Training	$	
ACT Expenses - Travel/Meals	$	
ACT Expenses - Venue Expenses	$	
Annual Conference Mileage	$	
Annual Conference Reg Fees	$	
Travel & Meals Exp	$	
Volunteer Appreciation	$	
Other _____	$	
Other _____	$	

Total Expenses:	**$**	**0.00**	***ATTACH ITEMIZED RECEIPTS AND ALL RELATED PROOF OF EXPENSES***
Less Cash Advance:	$	#VALUE!	
Difference	**$**	**#VALUE!**	

Submitted by: ***(Person Seeking Payment)***

Approved by: ***KOT - State Financial Secretary***

Electronic signatures are acceptable / attach email approval