GLOBAL METHODIST CHURCH
UPPER MIDWEST CONFERENCE

DOWNLOAD A COPY FOR YOUR USE AND THEN FILL OUT. PLEASE LEAVE THIS BLANK FOR OTHERS TO DOWNLOAD AND USE.

Reimbursement Process:

1. **Fill out the Expense Voucher**.
2. **First-time reimbursement only:** Complete the **Direct Deposit Form** and send it directly to Shanna Pinkerton at finance@uppermidwestgmc.org ***(Do not send Direct Deposit Form to your leader)***.
3. **Submit for approval:** Send your completed Expense Voucher and ***all receipts*** to your leader for approval.
    a) **Presiding Elders:** Send to Pastor James Parks or Pastor Ross Reinhiller for approval.
    b) **Ministry Committee/Team Members:** Send to your ministry leader for approval.
    c) **Clergy/Churches:** Send to your Presiding Elder for approval.
4. **Leader approval:** Once approved, the leader should sign the Expense Voucher and forward it—***along with the receipts***—to Shanna Pinkerton at: finance@uppermidwestgmc.org.

Please note:

- If received by the finance team by Wednesday, reimbursement will be processed and payment submitted on Friday of the same week.
- If received after Wednesday, the reimbursement will be processed and payment submitted on the Friday of the following week.
- Reimbursements of over **$2,500** will require additional processing time for **Superintendent approval**.
- Mileage will be reimbursed at the current IRS mileage rate.

Thank you for your attention to these procedures and for helping us maintain a smooth reimbursement process.

Upper Midwest Global Methodist Church Conference Finance Team

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Expense Voucher

This form is for the reimbursement of expenses paid by you for the benefit of the Upper Midwest GMC.

Pay to		
Address		
City	**State**	**Zip**
Email		

Date & Description of Expense	Account	Amount

Total: 0.00

Comments/Notes

_____

_____

_____ _____

Signature of Requestor **Date**

_____ _____

Signature of Approval **Date**

For payment, expense vouchers need proper support and approval.
For support, there should be an invoice or detailed receipt.
Please attach a copy of all invoices/receipts.

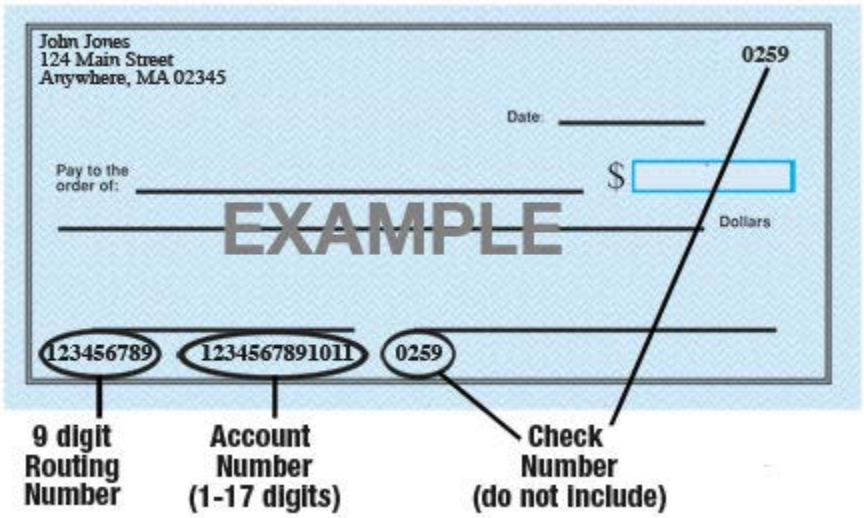
DIRECT DEPOSIT AUTHORIZATION

Please print and complete **ALL** the information below.

Name: _____

Address: _____

City, State, Zip: _____



Name of Bank: _____

Account #: _____

9-Digit Routing #: _____

Type of Account: ☐ Checking ☐ Savings (Check One)

Attach a voided check for each bank account to which funds should be deposited (if necessary)

Upper Midwest GMC is hereby authorized to directly deposit my payment to the account listed above. This authorization will remain in effect until I modify or cancel it in writing.

Signature: _____

Date: _____