

BRIDGES US

Reimbursement Request Form

Instruction: Please complete this form and attach all relevant receipts. Upload the signed form and receipts to the Bridge Leader Dashboard.

1. Leader Information

Full Name:

Email:

Date of Submission:

Ministry / Group Name:

2. Expense Details

Date	Description of Expense (Item, Purpose, Event)	Category (e.g., Food, Travel)	Amount (\$)
			\$
			\$
	TOTAL REIMBURSEMENT REQUEST		**\$** _____

(Note: Please ensure the Total matches your attached receipts)

3. Approval & Signature

I certify that the expenses listed above were incurred on behalf of BridgesUS ministry activities.

Submitted By:

(Signature)

Date: _____

For Office Use Only

Approved By: _____

Date: _____