



## PASTORAL MINISTRY—MAPM EXPENSE REPORT

### REIMBURSEMENT REQUEST

Name \_\_\_\_\_ Dates Traveled \_\_\_\_\_ to \_\_\_\_\_  
Phone \_\_\_\_\_ University Attending \_\_\_\_\_  
Today's Date \_\_\_\_\_

### TRAVEL EXPENSES:

Airfare \_\_\_\_\_  
Hotel \_\_\_\_\_  
Car Rental \_\_\_\_\_  
Parking \_\_\_\_\_  
Tolls \_\_\_\_\_  
Miles \_\_\_\_\_  
1/2 Per Diem \_\_\_\_\_

*\*Kindly ensure **all receipts are included** when submitting your expense report. Thanks for your attention to this detail.*

Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
*Ministerial Director*

\_\_\_\_\_ Date: \_\_\_\_\_  
*Executive Secretary*

**NOTE:** *The maximum annual reimbursement for travel-related expenses to attend university classes is \$5,000.00. Any costs exceeding this amount will be the responsibility of the pastor.*