

*New Albany Indiana Stake
Request for Stake Funds*

Submitter please complete all boxes, attach receipts clearly indicating the items for which you are requesting reimbursement, and send paper copies or digital copy (jpg or pdf) of form and receipts to the auxiliary president or high councilor responsible for the activity.

<input type="checkbox"/> Reimbursement	<input type="checkbox"/> Advance	<input type="checkbox"/> Payment	Date: _____
Make Check Payable to: _____			Amount \$ _____
<input type="checkbox"/> Will Pick Up Check <input type="checkbox"/> Mail Check <input type="checkbox"/> electronic funds transfer			
Mail Check to (address and name if different from payee) _____			
Requested by: _____			
Reason for Expenditure: _____			

Approving individual: Put and "X" in the box next to the category that applies to this funds request. Ensure receipts match total expense. Taxes will be reimbursed by the Stake. Sign the form and email a digital (jpg or pdf) copy to nastakefinance@gmail.com or submit the paper copy to the Stake.

Activities _____
(Stake Presidency or councilor over area)

- Adult Activities
- Christmas Devotional
- Choir Music
- Family History Center
- Father/Son campout
- Seminary Graduation
- Youth Combined Activities
- Youth Conference

Administration _____
(Stake Presidency)

- Office Equipment
- Office Supplies

Curriculum _____
(Stake Presidency)

- Marriage & Family Relations
- Self-Reliance

High Priest _____
(Stake Presidency)

- High Priest Quorum Meeting
- Public Relations
- Stake Conference
- Unprogrammed expense

Primary activities _____
(Stake Primary President)

Relief Society _____
(Stake Relief Society President)

Activities Zone conference

Single Adults _____
(High Councilor over area)

SA YSA

Young Men _____
(Stake YM President)

Activities Camp

Young Women _____
(Stake YW President)

Activities Camp

Check # _____

Date of check _____

Amount: \$ _____

Signature of Stake President _____