

IMMANUEL UNITED CHURCH OF CHRIST

118 Oak Street

Neenah, WI 54956-3034

Date _____

COMMUNITY MEAL MATERIAL DONATION FORM – FUND # 60

Donation by _____

Envelope Number: _____

Address _____

RECEIPT DATE	PROVIDER	BUDGET LINE	DESCRIPTION	COST
Credit Account # 02-4011-018 (automatic)				
Expense/Debit Account # 02-5011-018 (automatic)				

*Note: No goods or services were provided by the church in return for this contribution:

Requested by _____

GRAND TOTAL \$ _____

Approved by _____

Receipt Attached ___ Yes ___ No

Date: _____

Date: _____

4 copies: Two to Financial Secretary, one copy to Donor and one to Treasurer.

February 2015