

# Community of Christ

GREATER PACIFIC NORTHWEST USA MISSION CENTER  
Financial Office

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## **Bold Moves Grant Advance Reconciliation**

(please type or print info, and staple receipts to back of form with items clearly marked)  
(advance must be reconciled with MCFO no later than 2 weeks following final purchases)

**Name:** \_\_\_\_\_ (to whom the advance was given)

**Congregation/Group:** \_\_\_\_\_

**Project:** \_\_\_\_\_

**Amount of advance given:** \$ \_\_\_\_\_

**Attached expense receipts total (minus):** \$ \_\_\_\_\_

**Balance of cash/check included (minus):** \$ \_\_\_\_\_

**Total (equals):** \$ -0-

**Submitted by:** \_\_\_\_\_  
(signature of the one to whom the advance was given)

**Date:** \_\_\_\_\_

**Project Director's Signature:** \_\_\_\_\_