



Growth Group Leader Reimbursement Form

Please use this form to submit your Growth Group expenses including leader resources and any books that you have purchased for your group participants for which you were not reimbursed. Group participants are expected to pay for the full amount of the book that you have purchased for them, unless they request assistance from you in paying for the book. We ask that participants do reimburse you a minimum of \$5.

Group Leader's Name: _____

Cost and description of items purchased: _____

Reimbursement Payable to:
Name: _____
Address: _____
City: _____ State: _____
Zip: _____ Phone: _____

Total cost of items purchased	\$ _____. ____
Subtract amount you have been reimbursed	- \$ _____. ____
Total Requested Reimbursement	\$ _____. ____

Please submit your receipt(s). You do not need to turn in any payments you have received from participants as you should keep these payments to offset your total reimbursement request.

**You can turn this form in at Next Steps or mail it to:
133 W 2nd St, Ottumwa, IA 52501.**