

MINISTERIAL DEVELOPMENT
REIMBURSEMENT REQUEST FORM

Office of the Diaconate

Maximum Allowance: \$150.00 per fiscal year per couple
(fiscal year is July 1 to June 30)

Course Title: _____

Facility/place: _____

Dates Attended: _____

#Credit Hours (Class Hours): _____

Course Fee: Amount Requested: _____

Make check payable to:

Name: _____

Address: _____

City: State: Zip Code: _____

Parish/Agency: _____

Your SS#: _____ Deacon ID: _____

Email: _____

Reimbursement is for the current fiscal year. All requests for reimbursement must be made by June 30th.

Events sponsored by the Office of the Diaconate and Diaconate Council are not reimbursable.

***Note that in fiscal years in which an overnight convocation is convened, the \$150 allowance will be reduced to \$50 (as the Office of the Diaconate needs help to defray the expenses of the overnight convocation).**

Send completed form to:

Office of the Diaconate

816 Marengo

Forest Park, IL 60130 or e-mail: diaconate@archchicago.org