



Church Extension Fund



Michigan District, LCMS

Circuit Convocation Grant Expense Voucher

Main Contact & Circuit: _____

1. Please describe the Convocation Event held. Include relevant details (*e.g., date, location, etc.*)

_____ # of lay attendees

2. Please attach receipts/invoices of the costs incurred that this grant was used for (*e.g., vendor costs, registration fees, supplies, travel expense, etc.*) *The funds being reimbursed must have been approved expenses.*

3. Please list total costs seeking to be reimbursed: \$_____

There are additional grants that will be awarded to the circuits that use the grant funds in the most creative and impactful way. To be considered, applicants must send in pictures and impact stories from the event. These must be submitted by 2/28/25. Winners will be informed in the Second Quarter of 2025.

Questions? Contact Kris Nowak at (800) 242-3944 (kris.nowak@mi-cef.org) or Laurie Brown at 734-665-3791 (laurie.brown@michigandistrict.org)

Signature

Date

Church (Name & City) to be reimbursed

I verify that I have read the terms and conditions for reimbursement.