

BURUNDI MISSIONS FINANCIAL ASSIGNMENT FORM

Missionary Financial Assignment Form

Missionary Information

- Full Name: _____
- Date: _____

Financial Details

- Amount Received (₦): _____

Expenditure Details

S/N	Item/Description	Amount (₦)
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1

2

3

4

5

6

7

8

9

10

- Total Expenditure (₦): _____
- Balance Remaining (₦): _____

Balance Refund Details

- Was the balance refunded? (Yes/No) _____
- If Yes, to whom was it refunded? _____
- Bank Name: _____

- **Account Name:** _____
- **Account Number:** _____
- **Date of Refund:** _____

Additional Personal Funds Used by the Missionary

- **Did you add personal funds?** (Yes/No) _____
- **If Yes, total additional amount spent (₦):** _____
- **Breakdown of additional personal funds spent:**
 - _____ Amount (₦): _____
 - _____ Amount (₦): _____
 - _____ Amount (₦): _____
 - _____ Amount (₦): _____
 - _____ Amount (₦): _____

Reimbursement Request

- **Total Amount Needed to Balance the Missionary (₦):** _____
- **Bank Name:** _____
- **Account Name:** _____
- **Account Number:** _____

Missionary Declaration I, _____, confirm that the above financial records are accurate and true to the best of my knowledge.

Signature: _____ **Date:** _____

For Official Use Only

- **Verified by (Mission Finance Officer):** _____
- **Signature:** _____ **Date:** _____
- **Comments:**

End of Form