



SAINT ELIZABETH ANN SETON
Catholic Church and School
10700 Aboite Center Rd. Fort Wayne, IN 46804



Fidelis Reimbursement Request

Reimbursee Name: _____

Address: _____

Purpose of expense:

SEAS Account code to apply expense to:

- \$ - 444.360.03 – Fall/Spring Excursions & Day of Services
- \$ - 444.810.02 – Weekly Meeting food & HAWC
- \$ - 444.825.01 – Gifts
- \$ - 220.215.02 – Fraternal Liability account
- \$ - 220.215.01 – Ranch Camp
- \$ - 410.810 – General Supplies (plates, napkins, plasticware)

Total Amount: \$ _____

Purchased by: _____ Date: _____

Approved by: _____ Date: _____

**Please tape the receipt to the back of this form and
turn into Nichole or Jenn as soon as possible after
the charge is made.**