

**Rotary Club of Ventura-East
Request for Payment
or
Reimbursement**

Date: ____ / ____ / 20__

Check Payable to: _____

Amount: _____

For: _____

Avenue of Service: _____
Club Community International Vocational New Generations Interact Rotaract

Committee / Line Item: _____

Requested by: _____

Approved / Chairman: _____

Date Paid: _____ Check # _____