

## Expense Reimbursement - Payment Request 2018-2019

Requested by: \_\_\_\_\_ District Title: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Reimburse me                      Pay invoice directly                      Invoice/Receipts attached (Required)

Date of Expense	Line Number	Account Description	Expense Claimed	Amount
<b>Date of This Request:</b>			<b>Total</b>	

Signature of Requestor: \_\_\_\_\_ Phone # \_\_\_\_\_

Governor Signature: \_\_\_\_\_ Treasurer Signature: \_\_\_\_\_

Make Check Payable to:  
 Mail Check to: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**All check requests go to the District Treasurer for payment.**  
**Email, Fax or Mail Request Form with Receipts or Invoice to:**

Gregg W. Burt, D5240 Treasurer  
 455 E. Thousand Oaks Blvd, Suite 101  
 Thousand Oaks, CA 91360  
 Phone: 805-496-5312 Fax: 805-309-1347  
 E-mail: Rotary5240@bill.com