Rotary District 5470
Reimbursement Request
RY 2026-2027

Name: _____ **Date:** _____

Address: _____ **E-mail** _____

_____ **Phone** _____

Reimbursement for (event and date(s): _____

(PETS, Administration, Committees, DG, DGE, DGN, AG etc.)

Rotary District Position: _____

Rotary District Committee: _____ **AG Area:** _____

Please check this line if you want to have this request as an IN-KIND DONATION to the District. _____

Mileage:

Reimbursement: _____**Miles @ $.725 Per mile*** **=** _____

Or: Fuel Expense: . . . . . _____

Hotel (s): . . . . . _____

Meals: **Date:**_____ _____

Date:_____ _____

Registration Fees: . . . . . _____

Miscellaneous:

Explanation _____ _____

_____ _____

_____ _____

_____ _____

Signature: _____ **Grand Total :** _____

(Confirmation that expenses have not been reimbursed from any other sources.)

Please send this form and copies of receipts to:

Janna Haas, District 5470 Treasurer, PO Box 38343, Colorado Springs, CO. 80937

Cell: 719-440-7082 | Email: jannahaas.rotary@gmail.com

Updated 01/24,2026 effective 1 July 2026