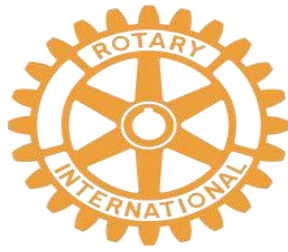


Rotary

D5180



Expense Reimbursement - Payment Request 2021-2022

Form must be completed entirely for reimbursement. Use Adobe Acrobat Reader to enable calculation feature.

Requested by: _____

Email _____ Phone: _____ Cell: _____

Reimburse Me or Pay invoice directly Invoice/Receipts attached

Date of Expense	Expense Description (Item or Service and <u>District Purpose</u>)	Amount
Date of This Request: _____		Total

Signature of Requestor: _____

District Governor Signature: _____ Treasurer Signature: _____

Make Check Payable to: _____

Mail Check to:

All expense requests go to the Treasurer for initial review.
 Email Request Form with Receipts or Invoice to:
Bob Deering - bobdeering5180@gmail.com