

ROTARY DISTRICT 5630 2022-23 EXPENSE REIMBURSEMENT REQUEST

Name: _____ Club: _____
 Address: _____ City/Zip: _____
 Phone: _____ Email: _____

Date	Description	Cost	Receipt Attached
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>

TOTAL AMOUNT DUE _____ **\$ 0.00**

Mail to: DG Deborah McCaslin
 80117 Weissert Rd.
 Broken Bow, NE 68822
 eMail completed form to: 5630.dg.2022@gmail.com

_____ requested by, please sign

Received by DG Deb McCaslin _____ Approved to Pay: _____ From Account _____

Received by District Treasurer Brooke Robertson _____ Paid-Check # _____
 Amount Paid \$ _____
 Date Paid: _____