

**ROTARY DISTRICT 5630 2022-23 EXPENSE REIMBURSEMENT REQUEST**

Name: \_\_\_\_\_ Club: \_\_\_\_\_  
Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date	Description	Cost	Receipt Attached
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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TOTAL AMOUNT DUE \_\_\_\_\_

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

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Received by DG Deb McCaslin \_\_\_\_\_ Approved to Pay: \_\_\_\_\_ From Account \_\_\_\_\_

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