

**WENATCHEE SUNRISE ROTARY
Reimbursement form**

Date : _____

Name to appear on Check : _____

Date	Vendor	Purpose	Accounting Line Item	Amount
TOTAL:				

Submitted By: _____

*** Please tape any receipts that are smaller than 8 1/2 x 11" to an 8 1/2x 11 piece of paper.
(you can put multiple receipts on a piece of paper, please just make them readable)