



# REIMBURSEMENT REQUEST

Fill out the form below completely. All receipts should be attached to the form and emailed to [coronadorotary@sbcglobal.net](mailto:coronadorotary@sbcglobal.net) or faxed to (619) 435-1141.

Date \_\_\_\_\_  
Budget Category \_\_\_\_\_  
Approver Name \_\_\_\_\_  
Submitted by \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Send Check to (name) \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_

Description of Purchase	Amount
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total	_____

Check Number _____	Amount _____	Date _____
Budget Category _____		

ROTARY CLUB OF CORONADO  
PO BOX 180487  
CORONADO, CA 92178