

**Rotary International District 6510**  
**2023-2024 Expense Reimbursement Form**

Send completed form and supporting documentation to:  
Christopher H. Lyons, DG  
166 Mills Road, Walnut Hill, IL 62893, or  
Email to: LyonsD6510@Gmail.com

**Date** \_\_\_\_\_  
**Payee Name** \_\_\_\_\_  
**Address** \_\_\_\_\_

**Phone** \_\_\_\_\_  
**Amount** \$ \_\_\_\_\_

**Requested by** \_\_\_\_\_  
**Address** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Mail Check to**                      **Payee**                      **Person making request**

**Description of** \_\_\_\_\_  
**Expense/Advance** \_\_\_\_\_

**Charge to Program or** \_\_\_\_\_  
**Budget line item** \_\_\_\_\_

**Approved by Committee Chair** \_\_\_\_\_  
**Date** \_\_\_\_\_

**Approved by District Governor** \_\_\_\_\_  
**Date** \_\_\_\_\_

Copy to: David E. Matthews PDG, [demrotary@mediacombb.net](mailto:demrotary@mediacombb.net)