

Rotary Club of Lillington



Club Reimbursement/Check Request

Email receipts and this completed form (or present at meetings) to the club treasurer, Karen Kratz.
kdkratz@gmail.com

Date: _____

Name: _____

Rotary Title/Position: _____

Please attach documentation and/or receipts and send within 14 days after the event/receipt.

Date	Item/Description	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
	TOTAL	_____

Your signature _____

Mailing Address _____

City/St/Zip _____

Comments _____

Treasure use only

Charge to (account and budget line item) _____

Treasurer _____ Paid date _____ Check # _____