Rotary Club of Healdsburg Sunrise

Expense Reimbursement Request

Club Member Name:

Purpose of Expense:
Event or Program::

Date:

Rotary Club Purpose:

Itemized Expenses

DATE	DESCRIPTION	CATEGORY	COST
		SUBTOTAL	$ -
		Less Cash Advance	
		TOTAL REIMBURSEMENT	$ -

Note: Attach original receipts of all purchases.

Club Member Signature Date

Committee or Event Chair Approval Signature Date