



## District 7305 Reimbursement Request

From \_\_\_\_\_ Date \_\_\_\_\_

Club \_\_\_\_\_ Phone \_\_\_\_\_

Committee/Authorizing Officer \_\_\_\_\_

Description / Comments / Cost

Total \$ \_\_\_\_\_

Check payable to \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Documentation for Reimbursement Payment:

\_\_\_\_\_ Invoice attached \_\_\_\_\_ Receipts attached

Signature \_\_\_\_\_

Date \_\_\_\_\_

Send request to: Dan Dougherty, District Governor  
8243 Birdie Lane  
North Huntingdon, PA 15642

Cell: 412-523-2929

[DanDougherty@RotaryDistrict7305.org](mailto:DanDougherty@RotaryDistrict7305.org)

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### To be completed by District Treasurer

Date received \_\_\_\_\_

Date entered \_\_\_\_\_

Date check issued \_\_\_\_\_

Check number \_\_\_\_\_

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