



ROTARY CLUB OF GLENVILLE

REQUEST FOR CHECK OR REIMBURSEMENT

Requester must attach a copy of the invoice or receipt, and obtain appropriate signatures for payment.

Name of Requester: _____ Date: _____

Phone Number of Requester: _____

Name of Payee: _____

Mailing Address for Payment: _____

Event or Project: _____

Date:	Description of Expense:	Amount:
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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Total: _____

Requester Signature: _____

Authorization Signatures

Signature

Print Name

Project/Event Chair Approval:	_____	_____
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1st Board Authorization:	_____	_____
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2nd Board Authorization:	_____	_____
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For Treasurer's Use: Project Account to be Charged/Notes

Amount & Ck #

_____	_____
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