



Rotary Club of Greater Clark County



Invoice Reimbursement/Check Request Form

Please scan all completed forms and receipts in PDF format, combined if possible - No JPG formats
Please ensure Expense/Reimbursement is Club or Foundation!

Date: _____

Project Title: _____ Committee: _____

Project Coordinator(s): _____ Expense Category: _____

Item Expense & Description:

Amount:

Total Check Requested:

Check Payable To: _____

Mail Check To: _____

Committee Chair/Authorizing Signature:

Date:

Check # Issued:

Date: