**Reimbursement Request Form**

*Please make check payable to:*

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date of Exp. | Explanation of Expense | Project or Activity | Account/Purpose **Treasurer Use Only** | Amount |
|   |  |   |  |  |
|   |  |   |  |  |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
| Subtotal |   |
|  |   |
| Total Amount |   |

**Within 30 days of expense, please attach original receipts and submit form**

**to the District President for approval. Then forward to the District Treasurer.**

If this is a reimbursement for expenses you incurred and you wish to donate some or all of it to the WRJ Pacific District, check the box below and fill in amount you are donating:

* *I would like to contribute $* *\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to the WRJ Pacific District.*

*(An acknowledgement letter will be sent if your contribution is over $250.)*

Check request submitted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 WRJ Pacific District President

Submissions via email are acceptable. Send form and receipts to wrjpd.president@gmail.com and treasurer.wrjpd@gmail.com.

|  |  |  |  |
| --- | --- | --- | --- |
| Check #\_\_\_\_\_\_\_\_ | Check Date \_\_\_\_\_\_ | Account \_\_\_\_\_\_\_\_\_\_ | Code \_\_\_\_\_\_\_\_\_\_ |