VOUCHER FOR ONLINE MEETING REIMBURSEMENT



Date of request:					DI	STRICT 101
Date of request: Requester Name: Club Office Held:			Check payable to (full pame):			
			Mailing address:			
Club Office Held:						
being requested for re 3. Submit via email Distr	imbursement an ict Admin Manag	d note the correspo ger (admin@d101tr	iece of paper to a piece of plain white paper. Multiple receipts n Inding number as listed below. n.org) for review, confirmation, and update of available distric	et credits.	-	
_			ict Credits will be considered non-reimbursable and Reim finance manager for payment.			
			Expense Description	Finance Manager's Use Only		
e Month of Expense	Currency	Amount	(If travel, indicate mileage and rate used in calculation.)	Account Label	Reporting Code	Event Period
1						
2						
3						
4						
5						
6						
7						
8						
9						
0						
	Total:			,	,	
	_					
pprovals						
District director's name (print):			District director's signature:		Date:	
_						
inance manager's name (print):		Finance manager's signature:		Date:	