



ROTARY DISTRICT 6250

EXPENSE REPORT

Date of Request _____

Pay to _____

Address _____

Date incurred _____ Purpose _____

*Meals		\$ _____
*Lodging		_____
*Supplies		_____
*Other	_____	_____
Mileage	_____ miles @ 0.50/mile	_____
Total		\$ _____

Approved by _____
(e.g., Committee Chair)

Indicate budget item:

- | | | | |
|-----------------------|-----------------------|----------------------|------------------------|
| ___ Youth Exchange | ___ GSE | ___ Speech Contest | ___ RYLA |
| ___ DG Nom. Comm. | ___ Dist. Advisory | ___ Finance Comm. | ___ Dist. Secretary |
| ___ Dist. Treasurer | ___ Ass't Governor | ___ Dist. Directory | ___ Gov. Plan. Council |
| ___ Dist. Trainer | ___ Public Relations | ___ Web Master | ___ Dist. Conference |
| ___ Dist. Assembly | ___ Leadership Trng. | ___ Pre PETS | ___ PETS |
| ___ Zone-Governor | ___ Zone-DGE | ___ Zone-DGN | ___ Zone-Committee |
| ___ Zone-PDG | ___ Polio Plus | ___ Amb. Scholarship | ___ WCS |
| ___ Foundation | ___ Visioning | ___ Member Develop. | ___ Member Extension |
| ___ New Generations | ___ Interact/Rotaract | ___ RI Conv-DGE | ___ Gov. Contingency |
| ___ DGE Expense | ___ DGN Expense | ___ DGNN Expense | ___ PDG Expense |
| ___ Dist Banners/Pins | ___ Dist. Contingency | ___ Other (describe) | _____ |

****ATTACH ALL RECEIPTS TO THIS FORM***

After approval, send this form with attachments to: Rotary District Treasurer
1208 Furseth Road
Stoughton, WI 53589