

**ROTARY DISTRICT 7475 FOUNDATION**  
**Joe Steiner, Chair**  
**Michael R. Townley, Treasurer**  
**CLUB PROJECT EXPENSE VOUCHER**

REQUESTED FOR PROJECT : \_\_\_\_\_

AMOUNT REQUESTED: \_\_\_\_\_ RECEIPT(S) ATTACHED: YES: \_\_\_\_\_ (initial)

DATE(S) OF PURCHASE(S): \_\_\_\_\_

REQUEST PAYMENT OF THE FOLLOWING: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CHECK PAYABLE TO: \_\_\_\_\_

TAX EXEMPT #: \_\_\_\_\_ MAIL TO NAME & ADDRESS : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PAYMENT DUE BY DATE: \_\_\_\_\_

CLUB NAME : \_\_\_\_\_ CLUB PRESIDENT: \_\_\_\_\_

I CERTIFY THAT I AM AUTHORIZED BY MY CLUB TO SUBMIT THIS PAYMENT REQUEST FORM:

PRINT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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EMAIL OR MAIL : EXPENSE VOUCHER WITH INVOICE/RECEIPTS TO FOUNDATION TREASURER *MICHAEL TOWNLEY* - [Michael.Townley@rotarynj.org](mailto:Michael.Townley@rotarynj.org) OR 342 RAHWAY AVENUE, SOUTH PLAINFIELD, NJ 07080-3741

NOTE: NO CHECKS WILL BE ISSUED DIRECTLY TO A VENDOR WITHOUT THIS COMPLETED REQUISITION AND INVOICE/RECEIPTS. THE INFORMATION ABOVE MAY BE SUBMITTED IN AN EMAIL IF PREFERRED.

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**FOR TREASURER ENTRIES ONLY**

AUTHORIZED BY: \_\_\_\_\_ DATE: \_\_\_\_\_ METHOD: \_\_\_\_\_

FUND: \_\_\_\_\_ VERIFICATION DATE: \_\_\_\_\_

FUNDS AVAILABLE: \_\_\_\_\_ THIS PAYMENT: \_\_\_\_\_ BALANCE: \_\_\_\_\_

PAYMENT MADE TO: \_\_\_\_\_

CHECK NUMBER: \_\_\_\_\_ IF PAID ELECTRONICALLY, CONFIRMATION NUMBER \_\_\_\_\_

DATE PAID: \_\_\_\_\_ TREASURER SIGNATURE \_\_\_\_\_

*ALL REQUISITIONS AND RECEIPTS WILL BE KEPT AND FILED WITH THE PROJECT PAPERWORK.  
A COPY OF THIS COMPLETED FORM WILL BE RETURNED TO REQUESTOR*