

LIONS CLUBS INTERNATIONAL DGE ADULT COMPANION TRAVEL EXPENSE CLAIM SINGAPORE

	DISTRICT:
PLEASE PRINT	
DGE NAME:	
First	Last
ADULT COMPANION NAME:	
First	Last
reimbursement.	
2) PROOF OF PURCHASE (COPY OF PAID	RECEIPT OR CREDIT CARD TRANSACTION).
	e booked and proof of purchase is received.
	send to Laura Delgado, LCI Accounting Department:
	ctGovernorClaims@lionsclubs.org
	0-706-9199
Phone: +1 63	30-468-6846
All payments will be made to the DGE unless re NAME and ADDRESS of who is to be reimburse	equested to be paid to a travel agency or district. Please indicate d (PLEASE PRINT):
NAME:	
ADDRESS:	
COUNTRY:	
TELEPHONE:	
EMAIL:	

MUST BE RECEIVED BY FRIDAY, JULY 17, 2020 - NO PAYMENT AFTER 60 DAYS PAST DUE