**J R McKENZIE YOUTH EDUCATION FUND**

**DISTRICT 9930**

**All claims to: Club Claim Form Name of Rotary Club…………………………….**

*J R Mc Kenzie Youth Education Fund Convenor*

*Elizabeth Dunn*

*14 Chatswood Place,* **Contact Person ………………………………….**

**Rototuna**

*Hamilton 3210* **Your phone**……………

**Date of application** .…/…./….. **Your Club Address** P O Box**……………………**

**Club President ……………………..**

**………………………………….Code**…………….……

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| **Name of Applicant** | **Age** | **Siblings**  **School**  **Age** | **Reason for claim eg: Clothes, Shoes etc.** | **Amt Claimed**  **$$** | **Club**  **Contribution**  **$$** | **JR Fund**  **$$** | **Office**  **√** |
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**I certify that I have seen all receipts, accounts or quotes relevant to these claims and will ensure the funds received will be used only**

**for the benefit of the claimant. Signed………………………………… …… Date ………/…………/………..**

*( For office use Date received………………………………………… Date processed…………………………….)*