



BIG BEAR VALLEY  
EDUCATION  
TRUST

### Request for Reimbursement of Expense

Name:	
Address:	
City, State, Zip:	

Expense (description and purpose)	Date	Amount
	TOTAL	

Attach original receipts if available. If the original receipts are not available, attach a copy of any correspondence and an explanation.

Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_