



Request for School Bus Reimbursement

(You must have received pre-approval in order to receive reimbursement)

DATE: _____

TO: SPU Accounts Payable c/o Beth.Miller@Seattle.Gov

FROM: _____ (Signature),
 _____ (Print your name) _____ (Phone)

SUBJECT: Reimbursement for transportation

School name _____

Field trip name _____ Date _____

Scan/ copy of bus invoice is attached

Please prepare warrant in the amount of: \$ _____

Warrant should be made payable to: _____ (Note: this must be a school or organization, checks cannot be made out to an individual)

Mail reimbursement to: _____ (Address)

For Internal use only:

Please charge to the following account:

Bus Unit	Org#	Fund	Account #	Project #	Activity#
SU0	SU116	DWW 44010	542900	N000264	Outreach_educ

Requested by: _____ Date: _____

Approved by: _____ Date: _____