



# VSSC 2008 Reimbursement Request

Conference Treasurer: JoLane Dunlap

Contact Information:

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Please complete the following information:

Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

Your Phone: \_\_\_\_\_

Your E-mail: \_\_\_\_\_

Amount to be Reimbursed: \_\_\_\_\_

Reason for Purchase/Items or Services Purchased:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please include your original receipt with this form and send to the address above. All reimbursements must be postmarked no later than 12 December 2008 to be considered.**

For general correspondence, please refer to the "Virginia Student Services Conference" for clarity and ease of processing requests.

Your Signature: \_\_\_\_\_