



Prince George
Electric Cooperative



**ROUNDUP FOR EDUCATION
REIMBURSEMENT REQUEST FOR TEACHER EXPENSES**

NAME OF SCHOOL _____

TEACHER _____

Instructions:
 Provide store and dollar amount for each receipt
 Teacher, teacher representative, and principal must sign form for reimbursement
 For questions, please call 804-834-2424 ext.1008 or send email to
 kkinsey@pgec.coop. Limit one teacher per reimbursement form.
 Attach paid receipt(s) to each reimbursement form.
 Mail completed forms w/receipts to: Prince George Electric Cooperative
 Attn: Kathy Kinsey
 P. O. Box 168,Waverly VA 23890

<u>Vendor/Store of Purchase</u>	<u>Dollar Amount</u>

****Total** \$

Date: _____

Teacher Signature: _____

Teacher Representative Signature: _____

Principal Signature: _____

***NOTE: Reimbursement checks will be mailed to teacher representative for distribution**

Prince George Electric Cooperative is an equal opportunity provider and employer