

PALOMAR COLLEGE CTE TRANSITIONS

MINI-GRANT REIMBURSEMENT REQUEST

Transportation

| | | | |
|-------------------|--|-------------------|--|
| Date | | High School Name | |
| Amount of Request | | Name of Requestor | |

Reimbursement Information:

| | | | |
|-------------------------------------|--|----------------------------|--|
| Accounting Contact | | Accounting Contact Phone # | |
| District Invoice # or Reference | | | |
| Payable to: High School District | | | |
| Payment address | | | |

I hereby certify that these expenditures comply with the transportation guidelines, policies and procedures required by this high school district.

District Authorized Signature (legible)

Palomar College Information

| | | | |
|-----------------------------|--|-------------------------------|--|
| Amount Approved | | Palomar Purchase Order Number | |
| CTE Transitions Coordinator | | Date: | |

Instructions:

1. Complete Section 1 and 2 above.
2. Required Documents (copies) must be attached to this form:
 - a. Driver log with authorized signatures, title of event and date of event.
 - b. Indicate rate and amount of payment.
3. All payments will be made directly to High School or High School District, please indicate correct payee in section 2. Form must be signed by authorized district employee.
4. Reimbursement request is due by 30 days from date of event.

If you have further questions regarding reimbursement, Please call
(760) 744 1150 ext. 3047

Mail this form with required documentation to:
Palomar College CTE Transitions Program

1140 West Mission Road
San Marcos, CA 92069