

California Community College Early Childhood Educators

Reminder: ALL expenditures MUST be pre-approved by the President

Please submit reimbursement requests immediately after expenses are incurred. Request must be submitted within **10 days** of the expenditure. Expenses submitted after **June 25th** of the fiscal year will not be reimbursed.

Please list all items and amounts for reimbursement. Receipts must be in the requestors' name and not a third part. All original/appropriate receipts must be attached in order to receive reimbursement.

Reimbursement Request			
Approved by President on:			
Method of pre-approval – Check one: <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> In person <input type="checkbox"/> Other			
If other, please explain _____			
Recipient Information			
Name		Date	
Signature			
Home Address		City and Zip Code	
Cell Phone		Alternate Phone	
Email Address			
Reimbursement Information			
Region # or Committee information:			
Event/Activity:			
Date of Event/Activity:			
Request Total:			
Make Check Payable to:			
Expense Details (attach all receipts):			
Documented Expense		Amount Spent	
1.		\$	
2.		\$	
3.		\$	
Total Requested			\$
Submit all Receipts and this form and mail to CCCECE Treasurer			
Jeanne Virgilio CCCECE: Treasurer 511 Encore Way Brentwood, CA 94513			
Office use Only			
Date Received		Date Paid	
Total Paid		Check Number	
Notes			

