

*Bedford County Department of Fire & Rescue  
 1305 Falling Creek Road  
 Bedford, Virginia 24523  
 Phone: (540)587-0700  
 Fax: (540)586-2176*

**REIMBURSEMENT REQUEST FORM  
 For Retail Fuel Purchases**

**DEPT. NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_ **PHONE#:** \_\_\_\_\_

**PERSON COMPLETING FORM:** \_\_\_\_\_

**TOTAL REIMBURSEMENT REQUESTED:** \_\_\_\_\_

<b>RETAILER &amp; LOCATION</b>	<b>DATE</b>	<b>VEHICLE #</b>	<b>VEHICLE MILEAGE</b>	<b>GALLONS/ \$\$ PER GALLON</b>	<b>GAS OR DIESEL</b>	<b>TOTAL COST</b>
<b><i>TOTAL</i></b>						

*\*\* Note: Original Receipts Must Be Submitted With Reimbursement Request*