

**OPTICAL PLAN**

**REQUEST FOR REIMBURSEMENT**

The attached receipt in the amount of \$\_\_\_\_\_ is submitted for the purpose of reimbursement in accordance with the contract agreement between the Ventnor City Board of Education and the Ventnor city Education Association, Ventnor Supportive Staff Association, Ventnor Administrators Association and/or non-affiliated employment contracts.

\_\_\_\_\_  
Staff Member's Signature

\_\_\_\_\_  
Date Submitted

Board Office Use Only

\_\_\_\_\_  
Date received

\_\_\_\_\_  
Date of Board Meeting

\_\_\_\_\_  
Date sent to employee