

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF ADMINISTRATION - TRANSPORTATION SERVICES
REQUEST FOR REIMBURSEMENT FOR EMERGENCY PURCHASES**

Mail Request To: **Transportation Services
Central Motor Pool
PO Box 233
Trenton, NJ 08625-0233
Attention: Thomas Mantel (609) 984-4323**

Agency Name:
Agency Address:
Agency Contact Name:
Driver's Name:
Home Address:
Employee ID #:
SG License Plate #:
Total Amount of Request: \$ <i>(NOTE: Original Receipt MUST be attached to this form)</i>
Reason for Emergency Expenditure:
Supervisor's Approval: Date:

NOTE: Please be sure receipts are dated within one fiscal year (July 1 to June 30)