



**Bridging the Gap**

401-36 Albert St.  
Winnipeg, Mb R3B 1G4  
Phone: 204-943-9029  
BridgingtheGap.Wpg@gmail.com  
www.BTGWinnipeg.ca

---

## Bus Reimbursement Form

School  Date

Mailing Address

Postal Code

Phone

Fax

Email

### Invoice

Date of Field Trip	Name of Transportation Company	Classroom Grade(s)	Teacher(s)	Cost
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Total

Pay to the Order of:

Please return a scanned copy of this completed form along with a copy of the invoice provided to you by the transport company by email to [bridgingthegap.wpg@gmail.com](mailto:bridgingthegap.wpg@gmail.com)

**Thank you!**