



ELECTRICAL CONTRACTORS TRUST OF ALAMEDA COUNTY

Phone: 510.867.0487 • Fax: 510.315.3240 • PO Box 4198 • Hayward, CA 94540

ECT SAFETY REIMBURSEMENT REQUEST FORM

April 14, 2008

ATTENTION: ACTIVE ALAMEDA COUNTY CONTRACTORS

**SUBJECT: 1ST QUARTER SAFETY REIMBURSEMENT REQUEST-
QUARTER ENDING MARCH 31, 2008.**

Please attach all safety invoices to this form and fax back to 510.315.3240. In order to qualify for the minimum \$250 safety reimbursement contractors should:

1. have worked a minimum of 500 hours in ALAMEDA COUNTY in the quarter
2. purchased items relating to safety during the current quarter and attach copies of invoices to this form
3. fax this form and copies of your invoices back to Deanna 510.315.3240 no later than **April 14, 2008**

\$250 REIMBURSEMENT—500 HOURS

\$500 REIMBURSEMENT—1000 HOURS

In accordance with the rules of the Trust, I am requesting reimbursement of the following safety items. Please mail check to my attention using the information listed below:

Invoice Date	Item Description	Amount
TOTAL		
Signature & Title		
Company & Address		

www.electricalcontractors.com