



**Los Al Bucks Program: Round 2**  
**Reimbursement Form**



Please fill out the form in its entirety, attach the Los Al Bucks collected, and a copy of the transaction report.

**Attn: Development Services Department**  
City of Los Alamitos  
3191 Katella Avenue  
Los Alamitos, CA 90720

Submitted by (print) \_\_\_\_\_

Phone No. \_\_\_\_\_

Email \_\_\_\_\_

Business Address \_\_\_\_\_

Make check payable to \_\_\_\_\_

Total number of Los Al Bucks submitted \_\_\_\_\_

Total value of Bucks collected \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*PLEASE REMEMBER TO ATTACH A COPY OF THE RECEIPTS OR A SALES REPORT\***