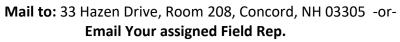


NH Office of Highway Safety





REIMBURSEMENT REQUEST COVER LETTER HS-1

Police Department: Click here to enter text. Total Number of Vacancies in Department: Remit to Address:	
Remit to Address:	
Hereby requests reimbursement for the following projects:	
20-02-04 STEP PATROLS \$	
20-02-04 OPERATION SAFE COMMUTE \$	
20-01-04 JOIN THE NH CLIQUE \$	
20-04-04 DISTRACTED DRIVING \$	
20-06-04 PEDESTRIAN BICYCLE \$	
20-07-04 DWI PATROLS AND MOBILIZATIONS \$	
20-03-06 E-CRASH (MDTs) \$	
20-03-06 E-CRASH (PRINTERS, SCANNERS, RECEIVERS) \$	
20-02-04 SPEED ENFORCEMENT \$	
\$	
\$	
\$	
TOTAL AMOUNT REQUESTED \$	
CERTIFIED BY: Rank/Title/Name:	
Signature and Date:	
Comments:	
□ Ok to Pay Field Rep. initials	
Date:	
HS-1 Reimbursement Cover Letter FFY24 Accountant Signature and Date:	