



**KENTUCKY ENERGY &
ENVIRONMENT CABINET**

VOLKSWAGEN SETTLEMENT REIMBURSEMENT FORM

Invoice Date: _____

Name of Entity To Be Paid: _____

Address: _____

City: _____ **State** _____ **Zip** _____

Signature of person submitting invoice: _____

Description of what is to be reimbursed (backup documentation is to be attached)

Total Reimbursement Request \$ _____