

| Reimbursement # (Office Use Only) | Family # |
|-----------------------------------|----------|
| | |

Reimbursement Form

Items must relate to each student's ILP. One receipt per line.

January 31st: Reimbursement deadline for July - December expenses & internet.

April 30th: Reimbursement deadline for January - April expenses & internet.

| Primary Parent First & Last Name: | | | Advisory Date:Teacher: | | | | | | |
|---|-----------------|-------------------|---------------------------|---------------------------------------|-----------|--|-------------------------------------|---------------------------------|--------------|
| | | | | | | | | | Office |
| # | Receipt Date | Student Name | Vendor Name | Description of Purchase or Service | Course | Lessons & Tutoring Dates & Times (Must be pre-approved) | Total Amount (Exclude Tax) | PRE-K Items Check Here | Fund Code |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| | | | | TOTAL TO BE RE | IMBURSE | D: Do not include tax | | | |
| FOR OFFICE USE ONLY Funding Codes: LOCATION 5-DIGIT F | | | | | AMILY# | | | | |
| Parent | Signature | | Date | A: Instruction | 100. | .145 | 1 .411= 5 | \$ | |
| Teacher Approval Date | | B: Cur & Supplies | s 100 | .145 | 1 .451= 5 | \$ | | | |
| reache | a Approvai | | Date | C: Internet | 100. | .145. 0 0 0 0 | .430= | \$ | |
| Busine | ss Office Appro | oval | Date | D: Pre-K Curricu | lum 100 | .146 | 0 .451= 5 | \$ | |
| | | E: ASAA Sports F | ees 100 | 100. 4 2 0 .700. 0 0 0 0 0 0 .491= \$ | | | | | |