

Expense Reimbursement Form

Purpose: To be reimbursed for purchases made on behalf of the school district. DO NOT USE FOR MILEAGE REIMBURSEMENT.

Complete the expense reimbursement form as follows:

Date – Enter the date on your receipt/date of purchase

Item Purchased & Reason for Purchase – Enter a clear, concise description of the item(s) or service purchased and why the purchase- was needed.

Budget Code – Enter the 21 digit budget code – if you are not sure of the code please ask your building Administrator/Principal or Admin. Assistant.

Amount – Enter the amount from your receipt. Please remember that schools are exempt from State sales tax therefore we will not reimburse you for any sales tax paid. Please see your school administrator for the school's tax exempt number before making purchases.

Strategy # - Some grant expenditures require a strategy number. Please ask your building administrator if your purchase requires a strategy number.

P.O. # - If you have a purchase order on the system for this expense please reference the purchase order number in this field.

Attach **originals** (copies will not be accepted) of your receipts to the form and make sure they match the amounts listed on the form.

Please Note: All receipts must be originals, itemized, readable, dated, and include how item was paid for, i.e. cash, credit card, debit card, check.

If the form is not complete it will delay your reimbursement check.