

ALTA-AURELIA COMMUNITY SCHOOL DISTRICT

Employee Reimbursement Expense Form

Employee Name _____

Instructions:

1. Enter a Requisition – You are the vendor to be paid
2. Fill out the form
 - a. Category examples: EL, Title, SPED (I, II, III), Activity (FFA, Basketball, etc.)
3. Attach **itemized** receipts
 - a. You must have an itemized receipt (line detail of each item) to get reimbursed
 - b. Do **NOT** reimburse for tax
4. Supervisor signature required
5. Return to Samantha Kopfmann’s mailbox
 - a. Reimbursement paid AFTER monthly board meeting

Date	Description	Category	Cost

Total Reimbursement _____

Employee Signature Date

Department Head Signature Date