

***Home & School Association***  
**Reimbursement Form 2023-2024**

**Name:** \_\_\_\_\_ **Grade/Department:** \_\_\_\_\_

Must be submitted directly to administration.

Advanced approval from administration is only needed if you are making a large purchase (anything  $\geq$ \$100) or for any purchase you wish to make after April 30<sup>th</sup>. This approval will be confirmed by the office before granting a reimbursement.

\_\_\_\_ School Credit Card

\_\_\_\_ Invoiced

\_\_\_\_ Reimbursement to self

\_\_\_\_ Check to vendor

Address: (Required) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

All supporting documentation (receipts, invoices, etc.) must be attached to the back of this request.

Reimbursements will be made in the form of a check, and funds will be withdrawn from the grade/department's HSA budget.

Requests may be submitted at any time during the month; however reimbursements will only be issued once each month unless extenuating circumstances are communicated, or it is a large monetary request.

**Reason for Funds:** (check one)

Project

Supplies

Improvement

**Approved by:** \_\_\_\_\_

**Amount Requested:** \_\_\_\_\_

**Approval Date:** \_\_\_\_\_

**Today's Date:** \_\_\_\_\_