Issaquah School District

565 NW Holly St

Issaquah WA 98027-2899

6214F1

Materials Reimbursement

Budget Year_____

Print Name_____
(Last, First, Middle)

Building/Dept. _____

Home Address_____

Phone No._____

City/State_____

Zip Code_____

District Policy: Principals/Department Heads may give employees authorization to purchase supplies or materials without a Purchase Order and to be reimbursed for those purchases. Single purchases must not exceed **$350.00** and **cannot** include equipment, travel or contractual expenses. All purchases from the same vendor on the same day will be considered a single purchase. **Itemized receipts** must be included and receipts should only include items to be reimbursed. For online purchases, include documentation of payment made or shipment completed. An "Order Confirmation" is **not** a receipt.

Receipt Date	List of Receipts/Reason for Expenditure	Amount
	Total Reimbursement Request	$ 0.00

If request includes food items for students, please indicate one of the following:

- ☐ Meets Nutritional Standards set in Procedure 6700P
- ☐ Served on non-school day
- ☐ Items to be used in an activity and not to be consumed
- ☐ Served more than 30 minutes after school
- ☐ Served off-district property

I hereby certify/declare under penalty of perjury under the laws of the State of Washington that this is a true and correct claim for necessary expenses incurred by me and that no payment has been received by me on account thereof. In addition, such falsification of District documents may be found as cause for misconduct and result in discipline up to and including termination.

Employee Signature:_____ Date:_____

Principal/VicePrin/Administrator Approval: _____

If ASB: Student Officer Approval: _____

Account Code: _____

Date: _____