AMERICAN HERITAGE SCHOOLS, INC.

Request for Reimbursement – Please attach ALL receipts to form

_NAME: _____ NAME: Receipt #1: Receipt #1: ☐ Classroom Set Up Sub-Total: \$ ☐ Classroom Set Up Sub-Total: \$ ☐ Classroom Supplies Sales Tax: \$ ☐ Classroom Supplies Sales Tax: \$ ☐ Field Trip TOTAL: \$ ☐ Field Trip TOTAL: \$ □ *Dept. Budget □ *Dept. Budget_____ Other _____ Other _____ Receipt #2: Receipt #2: ☐ Classroom Set Up Sub-Total: \$ ☐ Classroom Set Up Sub-Total: \$ ☐ Classroom Supplies Sales Tax: \$ ☐ Classroom Supplies Sales Tax: \$ ☐ Field Trip TOTAL: \$ ☐ Field Trip TOTAL: \$ □ *Dept. Budget_____ □ *Dept. Budget_____ Other _____ Other _____ Receipt #3: Receipt #3: ☐ Classroom Set Up Sub-Total: \$ ☐ Classroom Set Up Sub-Total: \$ ☐ Classroom Supplies Sales Tax: \$ ☐ Classroom Supplies Sales Tax: \$ ☐ Field Trip ☐ Field Trip TOTAL: \$ TOTAL: \$ □ *Dept. Budget_____ □ *Dept. Budget_____ Other _____ Other _____ Sub-Totals Sub-Totals Sales Tax TOTALS Sales Tax TOTALS Combined Combined TOTALS: TOTALS: Signature: Signature: *Dept. Head Signature: _____ *Dept. Head Signature: _____ Administrator Approval: Administrator Approval: **Check Disbursement: Check Disbursement:** \square My box ☐ My box ☐ Mail to: _____ ☐ Mail to: _____

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