COPPER RIVER SCHOOL DISTRICT

REIMBURSEMENT FORM FOR MATERIALS, UPSTREAM LEARNING

PARENT NAME: _____

ADDRESS: _____

CITY/ STATE/ ZIP: _____

PHONE #: _____ DATE: _____

EMAIL:

INSTRUCTIONS:
1. Receive permission to purchase materials as needed.
2. Turn this form in along with original store receipts.
3. All receipts must be turned in no later than May 15th.
4. No receipts will be accepted for previous school years.
5. Copies of this form can be made to have on hand.
6. All non-consumable items shall be returned to the district.

DO NOT USE THIS FORM FOR ACTIVITIES. (YOU CAN REQUEST ACTIVITY FORMS)

QTY	ITEM	THOROUGH DESCRIPTION RELATING TO EDUCATION	COST	RELATED SUBJECT	Is this item consumable?	STUDENT NAME(S)
EXAMP	(BOOK, CD)	IF RECEIPT SHOWS INDIVIDUAL ITEMS, LIST ONLY THE STORE/ COMPANY		MATH, ART	YES/ NO	
		TOTAL				

I verify that I have purchased and received these materials and I understand that all are to be returned to CRSD/ UL when we are finished using them.

PAGE: _____ of _____

PARENT SIGNATURE: _____

FOR OFFICE USE ONLY:

C/ S OFFICE APPROVAL: _____

SUPERINTENDENT'S APPROVAL: _____

BUSINESS CODE: 100-099-140-000-451