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| **ATTACH receipts** | | | | | | MISC. REIMBURSEMENT REQUEST FORM **North East School District**  **North East, PA** | | | | | | | | | | | | | **Date:** | | |  | |
| **CHECK PAYABLE TO:** | | | | |  | | | | | | | | | | **REQUESTED BY:** | | | | | |  | | |
| **ADDRESS:** | | **(Employee)** | | | | | | | | | | | | | | | | | | **ZIP:** | | |  |
|  | | | | | | | | | |  | | | | |  | | |
| **Address** | | | | | | | | | | | | State | | | | | | | | | | | |
| **DESCRIPTION OF ITEMS PURCHASED:** | | | | | | | | | |  | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | **DATE OF PURCHASE:** | | | | | |  | |
| **REASON FOR PURCHASE:** | | | | | | |  | | | | | | | | | | | | | | | | |
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| **Mileage** |  | | @ | .67¢ | | | |  | Amount | | | |  | **APPROVAL:** | | | |  | | | | | |
| $ | |  | |
| **Items Purchased……………………………** | | | | | | | | | $ | |  | | **APPROVAL:** | | | |  | | | | | |
| **TOTAL…………………………………......** | | | | | | | | | $ | |  | | **PO #/Account #:** | | | |  | | | | | |
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| Revised January 2024 | | | | | | | | |  | |  | |  |  | | | |  | | | | | |

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| **ATTACH receipts** | | | | | | MISC. REIMBURSEMENT REQUEST FORM **North East School District**  **North East, PA** | | | | | | | | | | | | | **Date:** | | |  | |
| **CHECK PAYABLE TO:** | | | | |  | | | | | | | | | | **REQUESTED BY:** | | | | | |  | | |
| **ADDRESS:** | | **(Employee)** | | | | | | | | | | | | | | | | | | **ZIP:** | | |  |
|  | | | | | | | | | |  | | | | |  | | |
| **Address** | | | | | | | | | | | | State | | | | | | | | | | | |
| **DESCRIPTION OF ITEMS PURCHASED:** | | | | | | | | | |  | | | | | | | | | | | | | |
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| **REASON FOR PURCHASE:** | | | | | | |  | | | | | | | | | | | | | | | | |
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| **Mileage** |  | | @ | .67¢ | | | |  | Amount | | | |  | **APPROVAL:** | | | |  | | | | | |
| $ | |  | |
| **Items Purchased……………………………** | | | | | | | | | $ | |  | | **APPROVAL:** | | | |  | | | | | |
| **TOTAL……………………………………..** | | | | | | | | | $ | |  | | **PO #/Account #::** | | | |  | | | | | |
| Revised January 2024 | | | | | | | | |  | |  | |  |  | | | |  | | | | | |
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