REIMBURSEMENT ITEMIZATION FORM
CAJON VALLEY UNION SCHOOL DISTRICT

B-36 (#9990)
(Revised 6/04)

Store/Vendor: _____ Requisition # _____

Department/Site: _____ Purchaser's Signature: _____

Administrator's Signature: _____ Date: _____

Quantity	Unit	Description	Unit Cost	Total

This form is to be used: **Please Check** ❑

❑ **1) As a replacement for an original receipt with Proof of Purchase attached (canceled check, bank or credit card statement).**

❑ **2) As backup to an original receipt for additional itemization.**

Subtotal	
Tax	
TOTAL	

Distribution: ***White - Purchasing with Requisition*** ***Canary - Department/Site Copy***