

REQUEST FOR REIMBURSEMENT FOR ITEM(S) PURCHASED PERSONALLY

Kansas City, Kansas Public Schools

NOTE: State statutes require use of purchase orders when purchasing items for district business. Accordingly, reimbursement for items purchased personally will only be approved in the event that following normal purchasing channels would impede the educational process and/or impair the safety of staff or students.

Name of person to be reimbursed (please print legibly) _____

Dollar Amount of Reimbursement _____ Date purchase made _____
(detail receipt(s) must be attached)

Vendor from which purchased _____ PO Number _____

Full Description of items purchased _____

Please explain why this item(s) could not be purchased via District required purchased methods

Signature of staff person _____ Date _____
by signing this form, I acknowledge understanding of the State statutes requiring use of purchase orders for all purchases and agree to comply with such laws in all future purchases to the full extent of my ability.

Signature of budget manager _____ Date _____
by signing this form, I acknowledge that I have informed staff of State statutes requiring use of purchase orders for all purchases, and have informed them that any and all future reimbursement requests may be rejected.

Please send fully completed and signed form to purchasing along with all detail receipts. Reimbursements for items purchased personally is at the sole discretion of District administration. All reimbursements will be made via normal accounts payable timelines, No reimbursement will be made without this form and detail receipts.