

KES Ohana Reimbursement Request Form

Instructions:

- Please complete and place in the Ohana mailbox
- Receipt(s) totalling the amount of reimbursement must be attached

Check requested by: _____
Name Phone Grade / Dept (if applicable)

Date submitted: _____
MM / DD / YYYY

Itemized Expenses:

Date	Description	Budget Category	Amount

Make check payable to: _____ Total Amount: \$ _____ -

Requestor Signature _____ Date _____

Approval Signature* _____ Date _____

* Principal approval required for all reimbursements submitted by KES staff/faculty

For Ohana Treasurer's Use Only:

Date Paid: _____ Notes: _____

Check No. _____

Check Amount: _____

Budget Category

Enrichment Programs	Music Library Computer LAE STEM Speech Festival CPAC Windward District Fitness Meet Math Team
School Support	Grade Level / Teacher Support Fund Fun Fair Grade Level Fund
Service Programs	JPO Student Council Leadership Camp K-Kids Bookworms
Student Recognition	Citizenship Awards Superstar and Hall of Fame Awards
School Events	Staff Appreciation Fun Fair Winter Songfest May Day
Parent/Family Involvement	Kindergarten Play Date Back to School Night Family Activities School Improvement Projects
Ohana Operating Expenses	Fall Fundraiser Spring Fundraiser Other Fundraiser Events Taxes Insurance Bank Charges Postage Copy / Paper Charges / Supplies Other Operating Expenses