

**TULARE COUNTY OFFICE OF EDUCATION
STATEMENT OF REIMBURSEMENT**

NAME: _____ DATE: _____

ADDRESS: _____ CITY/ZIP _____

DEPARTMENT: _____ TITLE: _____

SCHOOL(S) CLASS(ES)	EXPENSE ITEMS	AMOUNT
COLLEGE OF THE SEQUOIAS (list classes)	TUITION	
	BOOKS	
	FEES	
	MATERIALS	
FRESNO STATE UNIVERSITY (list classes)	TUITION	
	BOOKS	
	FEES	
	MATERIALS	
OTHER SCHOOL NAME: _____ (list classes)	TUITION	
	BOOKS	
	FEES	
	MATERIALS	

TOTAL AMOUNT REQUESTED \$ _____
(Must attach receipts and verification of grade "C" or better)

I hereby certify that this claim for expense(s) is not being reimbursed by any other source.

CLAIMANT'S SIGNATURE

(TO BE COMPLETED BY PERSONNEL STAFF ONLY)

EXPENDITURES AUTHORIZED BY: _____

Jeanne Nava, Assistant Superintendent, Human Resources

BUDGET # _____

APPROVED AMOUNT: \$ _____

(Sent to Accounting on: _____)