

ASB Request for Purchase (Expense Claim)

School: WOODINVILLE HIGH SCHOOL

Activity/Club _____

*Club Advisor _____ Date _____

Student Rep _____ Date _____

Prime ASB Advisor _____ Date _____

**By signing, I understand a Travel and Expense Reimbursement Claim Form must be submitted for reimbursement pursuant to the guidelines below and have shared this information with any student(s) who may make the purchase.*

Accounting Information
Office Use

Budget #: _____

Posted _____

VENDOR _____

PHONE _____

NOTES _____

Qty	Units	Item #	Description	Unit Price	Total	Office Use

Subtotal _____

Tax _____

Shipping _____

Total Cost _____

*ASB law requires preapproval for expenditures. Keep in mind that purchases made without an actual purchase order in place prior to ordering become your personal financial obligation. Purchases made with personal funds should be a minimal sum. With prior approval, supplies and materials purchased for district use may be eligible for reimbursement by submitting a Travel and Expense Reimbursement Claim Form to the ASB Secretary. Claims must be submitted monthly. Employees should not use personal funds to contract for services under any circumstance. Gifts (flowers, shirts, jackets, gift cards, etc.) will not be reimbursed. Office supplies purchased from any vendor other than Office Depot, Office Max, KCDA or Keeney’s will not be reimbursed. When submitting the claim, an original, **itemized** receipt(s) is required with the store name. A credit card slip with a total dollar amount will not be reimbursed. Receipts should not include personal items that are crossed out. Alcoholic beverages (including non-alcoholic beer and wine) are not reimbursable and must not be on the receipt.