

Lompoc Unified School District
*Purchasing Pre-Approval for
 Employee Reimbursement*

Itemization of Purchases:

<u>Vendor</u>	<u>Description of Purchased Item[s]</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total _____

Reason(s) for Reimbursement:

- 1) Purchase orders are not accepted by the vendor and/or _____
- 2) District credit card payments are not accepted by the vendor and/or _____
- 3) I checked with the Purchasing department staff and they authorized the purchase without a Purchase Order after exhausting all district payment options _____

Certification for Reimbursement:

I hereby certify that these purchase(s) were made to support the improvement of the education program of the school, in accordance with the guidelines outlined in Board Policy 3350. I attached the cash register tapes or receipts that match the above itemization.

Signature of Claimant _____ Date _____

Printed Name of Claimant _____

School/Location _____

Approval:

Budget Class: ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____

Signature of Principal/Department Head _____ Date _____

Signature of Purchasing Manager _____ Date _____