

SMJUHSD Fiscal Services

How to Complete Certification of Reimbursement Claim Form

Use for employee reimbursements (Form is available on the district website: Menu > Departments > Business Services > Miscellaneous > [SMJUHSD Reimbursement Claim Form](#))

- **Date:** Date completed form
- **Amount:** Total of reimbursements being claimed on the form.
- **Person To Be Reimbursed:** Your name and employee number (located on your paystub or login on employee portal).
- **Site/Address:** Provide either your work site location or your home address.
- **Signature/Date:** Sign & date the form.
- **Item(s) Purchased:** List of the items being purchased or a description of the items purchased. For example, Pencils and note pads or field trip to visit colleges.
- **Budget Account:** Provide the funding for the reimbursement. For example: LCAP 1.9, Science dept., or Admin.
- **Authorized Signers:**
 - **Department Head:** Name of department head of person being reimbursed (if applicable)
 - **Site Administrator:** Principal of your site.
 - **Spec. Project Administrator:** The DO will obtain categorical funding approval if needed.

What supporting documentation is required for the reimbursement to be processed:

- All receipts **must be original, including** an **itemized list** of what was purchased, the **total** amount charged, the **payment method**, and **date**.
- If the purchase is for:
 - Food/meals/meeting supplies for employee/district meetings or events need:
 - Meeting agenda.
 - Sign in sheet (preferred).
 - A list of those who attended or are invited can be used if there is no sign in sheet available.
 - Itemized original receipts.
 - Purchases made for a field trip or students:
 - Information on the field trip (For example: agenda/itinerary or invite).
 - List of all who attended the trip (Students/Chaperones/Staff).
 - Itemized, original receipts.
 - Food for a student lab or activity:
 - Lab handout or description on how the food will be used in the lab or activity.
 - Itemized original receipts.
 - General class/office supplies (food purchases for FCS classes are considered in this category):
 - Itemized original receipts.

When further explanation is needed, please make a notation and provide an explanation detailing the circumstances of the situation:

- Name on receipt has a different last name than the person being reimbursed but is the same person.
 - Notation Example: Jane Smith is the same as Jane Doe; one is current last name and second is married name.
- Purchase was made on behalf of a different employee (all employees should be incurring their own individual expenses).
 - Notation Example: Put hotel room on Jane's card because Joe does not have a credit card.
- The hotel room was for multiple people:
 - Notation Example: Room for John Smith and Dave Jones.

If the Certification of Reimbursement Claim form does not include the funding source(s), contains appropriate signatures or include the required supporting documentation your reimbursement will be returned to you for correction and your payment delayed.