

**SWEETWATER UNION HIGH SCHOOL DISTRICT
LIBRARY REFUND FORM FOR INSTRUCTIONAL MATERIAL
PARENT/GUARDIAN REQUEST FOR PAYMENT**

Site: _____

Parent/Guardian Name: _____

Student Name: _____ Student ID#: _____ Gr: _____

Textbooks/Library Books

1. _____ Barcode # _____ Amount \$ _____ Found ☐
2. _____ Barcode # _____ Amount \$ _____ Found ☐
3. _____ Barcode # _____ Amount \$ _____ Found ☐

Total Refund Amount \$ 0

(Library Collections Textbooks/Other Books)

01	000000	0	1110	2420	4110		326	00000
Fund	Resource	PY	Goal	Function	Object	Site	Cost Center	Project

Mobile Device/Mobile Device Accessories

Do not Accept 3rd Party Items

1. Device Asset Tag # _____ Amount \$ _____ Found ☐ Price Adjustment ☐ Other ☐
2. Cable _____ Amount \$ _____ Found ☐ Price Adjustment ☐ Other ☐
3. Charger _____ Amount \$ _____ Found ☐ Price Adjustment ☐ Other ☐
4. Cover _____ Amount \$ _____ Found ☐ Price Adjustment ☐ Other ☐
5. Stylus _____ Amount \$ _____ Found ☐ Price Adjustment ☐ Other ☐

Total Refund Amount \$ 0

(IT Devices/Device Supplies)

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Fund	Resource	PY	Goal	Function	Object	Site	Cost Center	Project

Librarian _____/_____/_____
Date

Executive Director of Curriculum & Instruction _____/_____/_____
Date

Principal or Designee _____/_____/_____
Date

Information Technology Director _____/_____/_____
Date

Please make check payable to:

Parent/Guardian _____

Street Address _____

City _____ State _____ Zip Code _____

For Fiscal Services Use Only

Chief Financial Officer _____/_____/_____
Date

Library Staff: Attach paperwork that justifies amount being refunded (copy of original receipt or computer refund receipt).