

**OXFORD PUBLIC SCHOOLS**

**REIMBURSEMENT FORM**

*Please return original to the Business Manager's Office with all supporting original receipts.  
\*Please Note: The Town of Oxford and Oxford Public Schools do not reimburse for sales tax.*

**EMPLOYEE NAME:** \_\_\_\_\_

**EMPLOYEE NUMBER:** \_\_\_\_\_ **BUILDING:** \_\_\_\_\_

<b>DATE</b>	<b>ITEM PURCHASED</b>	<b>REASON/PURPOSE</b>	<b>AMOUNT</b>
			\$
			\$
			\$
			\$
<b>TOTAL REIMBURSEMENT:</b>			\$

**Account Number to be Paid From:** \_\_\_\_\_

**APPROVED:** \_\_\_\_\_ **DECLINED:** \_\_\_\_\_  
Principal/Administrator Signature

\*\*\*\*\*

**\*\* FOR BUSINESS MANAGER'S USE ONLY \*\***

**APPROVED:** \_\_\_\_\_ **DECLINED:** \_\_\_\_\_  
BUSINESS MANAGER

**DATE:** \_\_\_\_\_