

**REQUEST FOR REIMBURSEMENT
2007 -2008**

The following items have been purchased for the benefit of Stella Maris Academy.
ORIGINAL receipts must be attached.

Purpose: _____

Person requesting reimbursement: _____

Submit form with receipts attached to: Sheri Anastasi
Questions call Sheri at 858-454-2461 or via email pa_cpa@pacbell.net

<u>Date of Purchase</u>	<u>Description of Purchase</u>	<u>\$\$ Amount</u>	<u>Receipts attached</u>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>

Please make reimbursement payable to: _____

Address: _____



Date: _____ Check # _____ Account # _____