

PINNACLE CANYON ACADEMY – REIMBURSEMENT FORM

| Employee Name | Item Purchased | Purpose | Date | Account (Office use only) | Date Purchased | Amount |
|-----------------|----------------|---------|---------|---------------------------|----------------------|--------|
| Vendor | | | | | | |
| | | | | | | |
| | | | | | | |
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| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | Subtotal | \$ |
| Travel Expenses | | | | | | |
| Trip Purpose | Trip Location | Date | Expense | | | |
| | | | Mileage | | | |
| | | | | 0.50 | | \$ |
| | | | | 0.50 | | \$ |
| | | | | 0.50 | | \$ |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | Travel Expense Total | \$ |
| | | | | | Total Reimbursement | \$ |

Employee's Signature _____

Authorized by _____