Date Submitted:	
Date Submitted:	

CONNECTIONS FOR LEARNING

Reimbursement Request Form 2017 - 2018

	N	embursement Request Form 20	17 - 2010			
Please make c	heque payable to:					
Name:		Stu	Student Name:		Gr	
Mailing Address: Phone Number:		Stu	Student Name: Student Name:		Gr Gr	
		Stu				
		Stu				
	**** DEAI	LINE FOR SUBMISSION: MA	AY 31, 2018 *	<***		
Date of Purchase	Name of Vendor	Description: Textbooks/Supplies	Amount Not Incl. GST	GST	TOTAL Incl. GST	
TOTALS						
registration nur Be sure to inclu of funding is av	mber and <i>must not</i> include pende amount of GST paid, if arwailable after June 1st 2018, h	ines and deadlines. All receipts <i>must</i> in resonal/household items purchased. Receipts. Please also be aware that 50% of fundowever families may submit claims for the general to the 50/50 schedule (Jan 31st and June).	eipts should also be a ding is available afte heir full funding allo	attached in order Tanuary 31st a	er listed on form and the other 50%	
Parent Signature:		Teacher A	Teacher Approval:			
Approval for payment:		Processed	:	Recorded	:	

Code: 01 - 416 - 01 - 000 - 000 - 05