

EVERGREEN ACADEMY OPT REIMBURSEMENT FORM

CLASSROOM ALLOWANCE ONLY

Name of Requester:		Date:	
Make Check Payable To:		Amount:	\$
Description of Expense(s):			

Instructions/Next Steps
<ol style="list-style-type: none"> 1. Complete form in its entirety. Incomplete forms will not be processed. 2. Staple photo copies of your receipts to the form. <i>*You may include original receipts BUT they will not be returned to you.</i> 3. Place form and receipts into the OPT Box in the front office. 4. Reimbursement will be issued within 30 days from when the form and receipts were turned in. 5. Reimbursements will be placed in staff mailboxes. <i>*Should you require a reimbursement to be mailed, please provide a self-addressed envelope with your documentation.</i> <p style="text-align: center; margin-top: 10px;">All questions should be directed to the OPT Treasurer via email: evergreenopt.treasurer@outlook.com</p>

FOR OFFICE USE ONLY			
OPT Check #:		Date Issued:	
Amount Paid:		If different than amount requested, please explain:	
Notes:			