

KORTRIGHT HILLS PUBLIC SCHOOL School Council
Reimbursement form

Date: _____

Paid to: _____

Reason/ Event (ie special event - Ice Cream Social)

Items:

Item#	Quantity	Description	Price (each)	Price (total)

APPROVAL

 Crystal / Chantalle / Melanie
 School Council (1 signature)

This form will be kept in the school office in the school council binder.

Cheque number: _____

Treasure use:

	filed
	Put in spread sheet