

## **Oxford Public Schools**

## **Prior Approval for Reimbursement Form B**

Directions: Fill out form and submit to School/Department Administrator. Administrator will send to Central Office for approval. The Central Office approved copy of this form is to be submitted with the requisition in Infinite Vision. Authorization for reimbursement is approved once the OPS Staff Member receives a copy of the processed Purchase Order from Central Office. Following approval the Staff Member may pay for all registration and travel costs. Reimbursement is processed (Using Form B) upon the return from the event and with proof of attendance.

Date:			Submitted By:	
School/Location:				
Itemized List of Anticipated Expenses for Reimbursement				
	Description of Reimbursement	Antici	oated Costs	Account for Reimbursement (Filled Out by Administrator)
Workshop or Conference or Event				
Food				
Lodging				
Transportation				
Other				
Prior Approval Needed for All Reimbursements				
Approved By (Cost Center) Administrator: Signature:				ate:
Approved By Superintendent/Assistant Superintendent: Signature:				ate:

A copy of this reimbursement form will be maintained in the Business Department and sent to the originating requester. Note, reimbursed will be processed only if prior authorization has been obtained using this form. Check will be issued with proof of attendance upon returning from the event.