Delabar CTE System CTE – Education That Works 121 S. Prairie Galesburg, IL. 61401 Phone 309.345-3828



www.roe33.net/careerandtechnicaleducation

SUB FEE FY2023 REQUEST FORM

THIS BOX FOR DELABAR ADMIN USE ONLY:

ORDER DATE:_____

Fax 309.345-6735

BUDGET ACCOUNT CODE:_____ PAYMENT AMOUNT:_____

ISSUE PAYMENT TO:

Instructions: Please complete and submit this form to the Delabar Office for prior approval. Delabar will return the form when it has been approved or disapproved. THE DISTRICT IS RESPONSIBLE FOR SENDING INVOICE TO DELABAR IN ORDER TO RECEIVE REIMBURSEMENT.

DATE FILED:	NAME:	
DISTRICT:	PHONE:	
CTE PROGRAM:	EMAIL:	
DATE OF ACTIVITY:	ACTIVITY:	

Educator Signature:_____

Administrator Signature:

Prior Approval:

This request has been _____ Approved _____ Denied If denied, reason: _____

Director Signature: _____ Date: _____

□ Invoice Received - Date:

□ Turned in to Bookkeeping for payment- Date: