

Greater Opportunities of The Permian Basin Inc.

Head Start School Readiness Academy

P.O. Box 3922 Odessa, Texas 79760 Office (432) 337-1352 Fax (432) 333-3373

REIMBURSEMENT REQUEST FORM

(THIS IS NOT A PURCHASE ORDER)

Approval must be received from Admin staff <u>PRIOR</u> to purchases being made.

Receipts must be attached to this form and submitted to the office within one week of purchase.

Center Name: GL Account Number:				
			(To be con	npleted by A/P clerk)
Purchase approved by:(Administr	proved by:(Administrative Staff -Name)		Date:	
Method of approval: Per phone	approval		Per email approval	☐ In person
Employee Name:				
Employee Address:		-		
		_		
DESCRIPTION	QUA	NTITY	UNIT PRICE	TOTAL AMOUNT
GRAND TOTAL TO BE REIMBURSED TO EMPLOYEE				
	_			
Requested By		A	Approved By (Supervisor)	
			ecutive Director (m	oust be signed
		⊏X€	cutive Director (II	iust be signea)