

## ORINDA UNION SCHOOL DISTRICT

### Employee Reimbursement Process

Reimbursements are for EMPLOYEES only. Employees who anticipate incurring expenses on behalf of their classroom, should follow the following procedures to avoid problems with the processing of their reimbursement request.

- All purchases/expenses must have PRIOR authorization in the form of a Purchase Order (PO) and a signed pre-approved reimbursement form (attached)
- The PO must be generated BEFORE expense is incurred
- The PO is approved by the employee supervisor/Principal and the District Office (Director of Business Services)
- All reimbursements must be completed within the fiscal year in which the purchase occurred

### Required Documentations for Employee Reimbursement

- An approved PO generated PRIOR to the date of purchase
- Original (**copies not acceptable**) itemized invoice or receipt showing \$0 due for all expense reimbursements. No Exceptions.
- The Employee Reimbursement form signed by the claimant and supervisor
- All orders (online included) intended for classroom/school use must be shipped to and received at the school address as well as referencing employee name as the purchaser.
- Purchases made with gift cards, gift certificates, store rewards or store credit **will not** be reimbursed. No Exceptions.
- For all items ordered (books, instructional materials, or equipment), proof of delivery in the form of a packing slip is required.
- Payment processing of reimbursement requests will take approximately two weeks following receipt of all required documents as shown above.

### The items below are not allowable for reimbursement.

- Flowers
- Candy
- Greeting Cards
- Gift Cards
- Vendor Rewards
- Vendor or Store Credit

Important Note: All items purchased and reimbursed are the property of Orinda Union School District and must remain at the school site where the reimbursement was approved, even in the event of a voluntary/involuntary transfer or termination of employment with OUSD.

# EMPLOYEE REIMBURSEMENT REQUEST FORM

## Orinda Union School District

Employee Name: \_\_\_\_\_

Employee ID: \_\_\_\_\_ Date: \_\_\_\_\_

School Site:  DR  GL  SH  WR  OIS  DO

Purchase Order #: \_\_\_\_\_

### PRE-APPROVAL:

\_\_\_\_\_ SITE/DEPARTMENT APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

EXPENSE DESCRIPTION	Estimated Amount	Actual AMOUNT
	<b>TOTAL ESTIMATED:</b>	<b>TOTAL CLAIMED:</b>
	\$	\$

ACCOUNT CODES TO BE COMPLETED BY SITE ADMIN								
Fund	Resource	Goal	Function	School	Yr.	DUO	Object	Amount
_	_ _ _	_ _ _	_ _ _	_ _	_	_ _ _	_ _ _	\$
_	_ _ _	_ _ _	_ _ _	_ _	_	_ _ _	_ _ _	\$

Reimbursement should include the following to be processed for payment:

- In-store Purchases** -Original itemized purchase receipt that includes the date of purchase
- On-line Purchases**- Proof of payment showing a zero-balance due, AND
- On -line Purchases** -Proof of delivery with delivery date or confirmation of receipt of order

By signing, I acknowledge that all items/materials purchased and reimbursed are the property of Orinda Union School District.

EMPLOYEE SIGNATURE	DATE

SITE/DEPARTMENT APPROVAL	DATE

COMPLIANCE APPROVAL	DATE

BUSINESS DEPT APPROVAL	DATE