

SCHOOL OF ST. MARY

To Learn, To Serve, To Lead

2022-2023 **Teacher Organized After-School Activity REIMBURSEMENT REQUEST FORM via PAYROLL**

Requestor/Teacher: _____ Date of Request: _____

Activity Name:

Start & End Dates of Session: _____

of Classes Taught Per Session: _____

Fee \$ Charged Per Student	# of Students Registered	Total \$ Amount Charged

Total Teacher Reimbursement (90% of Total Amount Charged): \$_____ To Be Paid Via the Payroll System

> **Business Office Use Only Received:**

Approved: