



930-100 - 1195-6611-500

gave to Cathy to

pay out of ROTAN

OK per Michelle

	Date: 12-2-13	School: LHHS	
	Student Name: Ashley Backer	Student ID #: 157777	
	Student Age: 18 yrs. 3 months	Student Gender: Male Female	
	Free/Reduced:	- : cileie	
(Homeless:		
Assistance Type: Clothing Medical Coral Health Participation Fees Cother			
	ATTRIBUTE OF PAINS IN THE TOTAL TOTA		
	Description: Math of Money \$ 2500	4/ 1	
	Description: Math of Money \$ 2500	Watrition & Wellness	
	Seared Reimbursement To: LHHS Books	Sterre.	
	Lindra La Cons	RECEIVED	
	Signature of School Liaison		
		MA OILE	
Γ		ACCTS PAYABLE	
	For District Office Us	e Only:	
	Grant Number: 100 100 100 120		





Date: 12-2-/3 School:	LHHS	
Student Name: Student ID	#:	
Student Age: 17 yrs. 9 months Student Go	ender: Male Female	
Free/Reduced:		
Homeless:		
Assistance Type: Clothing Medical Coral Health Partie	cipation Fees	
Armount of Reimbursement: 25.99		
Description: Nutrition + Wellness for Life \$15.00 Fund		
Of Business & Finance \$10.00		
Serad Reimbursement To: LHHS BookStore Landra La Como Signature of School Liaison	RECEIVED MAY 0 1 2014 ACCIS FATABLE	
For District Office Use Only:		
Grant Number: 100-100 - 1000 - 1590 - 500		





Date: 1/14/14	School: LHHS		
Student Name Ravin Ogden	Student ID #:		
Strudent Age:			
Homeless:			
Assistance Type: Clothing Medical Coral Health Participation Fees Other Armount of Reimbursement: 52.50			
Description: Class bees			
Serad Reimbursement To:	RECEIVED		
Dunniger	ACCTS PAYABLE		
Signature of School Liaison			
For District Office			





Date: 12/3/13 Se	thool: LHHS
Student Name: 5000 Gran St	tudent ID #:
Student Age: S	tudent Gender: Male
Free/Reduced:	·
Hameless:	
Assistance Type: Clothing Medical Oral Health	Participation Fees
Amount of Reimbursement:	/
Description: Classifies	
· · · · · · · · · · · · · · · · · · ·	
Serad Reimbursement To:	RECEIVED
	MAY 01 2014
1/2 Millinger	ACCTS PAYABLE
Signature of School Liaison	
For District Office Use Onl	v:
Grant Number:	





Date: 1-22-14 School: LH	HS
Student Name: Mariah Dunang Student ID #:	523/
Student Age: Student Gender:	☐ Male ☐ Female
Free/Reduced:	
Homeless:	
Assistance Type:	n Fees Other
Amount of Reimbursement: *//).00	à
Description: Fund Anto	
Send Reimbursement To: LHHS Book Store	
Lyndra La Cours	RECEIVED
Signature of School Liaison	VAY DI III S
	ACCTS PAYABLE
For District Office Use Only:	
Grant Number:	





Date: 12-2-13	School: LHHS
Student Names Mexicolex Down	Student ID #: 189187
Student Age: 18 yrs. 6 months	Student Gender: Male Female
Free/Reduced:	
Homeless: X	
Assistance Type:	al Health 🖾 Participation Fees 🔲 Other
Armount of Reimbursement: 440.00	
Description: Intermed. Studigrap	ch/web Dec 1-2
	RECEIVED
	MAY 0 1 2014
INLIC P	KStare ACCTS PAYABLE
serad kelmbursement To: LHH 3 500	ACCIS PATABLE
Lyndia Le Cours	
Signature of School Liaison	
For District Office	ce Use Only:
Graint Number:	





Pate: 12-2-13	School: LHHS
Student Name: Andre Leans	Student ID
Student Age: 15 yrs. 3 min 4/s	Student Gender: Male
Free/Reduced:	
Homeless:	
Assistance Type: Clothing Medical Coral H	lealth 🔯 Participation Fees 🔲 Other
Armount of Reimbursement: 41000	1 ♥ 256000541
	۸ħ.
Description: Fund Cabinetmaking \$1	200
	RECEIVED
	MAY A 1 DAM
	ACCTS PAYABLE
Send Reimbursement To: LHHS Boo	
Seria Kelmbursement 10: POU	J. WAKE W
Lyndia Le Cours	
Signature of School Liaison	
For District Office	Use Only:
For District Office Grant Number:	Use Only:





	LHHS		
Student Name Student I	D#: 15230		
Student Age: Student	Gender: Male		
Free/Reduced:			
Homeless:			
Assistance Type: Clothing Medical Oral Health Participation Fees Other			
\$ 0,000	1		
Description: Fund Nutrition & Wellness, +	Fund. Drafting		
Description: + 4 > d / (A) 1 1 110 H 4 4 9 VIII 22 /			
	-		
	RECEIVED		
Send Reimbursement To: LHHS Books to re-	MAY 01 2014		
Λ	ACCTS PAYABLE		
Landra Le Cour			
Signature of School Liaison			
For District Office Use Only:			
1	•		





Date: 1-16-14	School:
Student Names Krysting Mc Williams	Student ID #:
Student Age: 19 years 5 months Free/Reduced:	Student Gender: Male Female
Homeless:	
Assistance Type: Clothing Medical Coral	Health Participation Fees Other
Amount of Reimbursement: 2500	
Description: Intro Studio/grph/wi	eh / Des 1-2
Concert chair	RECEIVED
	ACCTS PAYABLE
Send Reimbursement To:L_HHS Bo	And the second s
Lyndra Le Como	
Signature of School Liaison	
For District Offic	e Use Only:
Grant Number:	





ate: 2-3-14	School: 1HHS
tudent Name: Tustin Mann	Student ID #:
Student Age: _/b	Student Gender: Male Female
ree/Reduced:	
Homeless:	
Assistance Type: Clothing Medical Oral Amount of Reimbursement: Description:	
	RECEIVED
	MAY 0 1 7014
	ACCTS PAYABLE
Send Reimbursement To: 2445 Books	
Signature of School Liaison	



Date: 9/20/13	School: LHHS
Student Names Wicholds Missirian	Student ID #:
Student Age:	Student Gender Male Female
Free/Reduced:	
Homeless:	
Assistance Type:	h 🛘 Participation Fees 🖟 Other
Armount of Reimbursement: \$\\ \sqrt{1}\\ \end{arrow}	
Armount of Reimbursement: \$15 Description: 425 plan	
U	
	- TOTALED
	RECEIVED
	MAY 01 2716
Sernd Reimbursement To:	ACCTS PAYABLE
Signature of School Liaison	
Signature of School Liaison	
For District Office Use O	nly:
Gramt Number:	





Date: 4-//-/4 Scho	ool: LHHS
Student Name: Student Name: Student Riggerstaff Student	lent ID 3947
Student Age: 18 yrs 8 months Student	dent Gender: Male
Free/Reduced:	
Homeless:	
Assistance Type: Clothing Medical Coral Health C	Participation Fees Dother
Amount of Reimbursement: 20,00	•
Description: Software Dev 1-2 C/955	Cec
	RECEIVED
	MAY U L ZOTE
	ACCTS PAYABLE
Send Reimbursement To: 1-14/5 Bookston	9
Signature of School Liaison	
Signature of School Liaison	
For District Office Use Only:	
Grant Number:	





nte: 4-1/-14	School: NHHS
udent Name Lauren Russe//	Student ID #:
cudent Age: 18	
ree/Reduced:	
omeless:	
Amount of Reimbursement: 1500 Description: C. 1655 FEET - G.D.	0/094\$1000 Encyoice\$500
Send Reimbursement To: <u>LHHS</u> Ba	olesione RECEIVED
Le Cours	MAY 0 1 . 514
Signature of School Liaison	ACCTS PAYABLE
For District Office Use Only: Grant Number:	