

STUDENT ACTIVITIES
S. Palo Verde Blvd
Havasupai City, AZ, 86403
854-5325

#83647

Lake Havasu Unified School District # 1 Free/Reduced and Homeless School Reimbursement Form

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Y	ITEM NO.	PRICE	TOTAL
(1)	SPORTPARTFEE	300.00	300.00
	Sports Part. Fee 13/14		
(1)	SPORTPARTFEE	300.00	-300.00
	Sports Part. Fee 13/14		
	TOTAL:		0.00

PAID TYPE:
.00 Cash
.00 TOTAL

ANCE DUE:
CUSTOMER
Total

Go Knights! Clear up Contributions ASAP!

14
San Francisco
7

School: LHHS

Student ID #: 83647

Student Gender: Male Female

Medical Oral Health Participation Fees Other

Reimbursement: \$150

Description: fee covered at half
(tennis + cross country)

Send Reimbursement To: _____

Signature of School Liaison H. Meyer

For District Office Use Only:
Grant Number: _____



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LHUSD Grants Department
Received on
1. 6 2014

Lake Havasu Unified School District # 1 Free/Reduced and Homeless School Reimbursement Form

Funds verified _____

Date: 5/14/14

School: LHHS

Student Name: [Redacted]

Student ID #: [Redacted]

Student Age: _____

Student Gender: Male Female

Free/Reduced: X

Homeless: _____

Assistance Type: Clothing Medical Oral Health P

Amount of Reimbursement: \$100

Description: Sports Fee

Send Reimbursement To: _____

Signature of School Liaison: [Signature]

LIBS STUDENT ACTIVITIES
2675 S Palo Verde Blvd
Lake Havasu City, AZ 86403
928-854-5325

QTY	ITEM NO.	PRICE	TOTAL
-1	SPORTPARTFEE	200.00	200.00
Sports Part. Fee 10/11			
TOTAL:			200.00

PAYMENT TYPE:
200.00 Credit to account
00.00 TOTAL

Go Knights Clear Up Operations 5/14/14

For District Office Use Only:

Grant Number: _____