

Header Text Font - Palatino



Developmental Research School
at the University of Florida

FLORIDA TEACHERS CLASSROOM SUPPLY FORM 2017-2018		
Name: _____ UFID #: _____		
Date of receipt	Vendor/Supplies Purchased	Amount
Allocation		237.95
Total amount		
Balance		

All expenditures were for the sole purpose of classroom materials and supplies to be used in the instruction of students assigned to me. I understand that the portion of the amount that paid to me, but not supported by receipts, will be collected via payroll deduction in two payments.

Signature: _____ Date: _____