



SUBSTITUTE REIMBURSEMENT FORM

CESA 3

Discovery Institute Fieldtrip

November 20, 2014

Date: November 20, 2014

School District _____

Teacher requiring a sub for **November 20, 2014 – Discovery Institute Fieldtrip:**

1) _____

I certify that a substitute teacher was hired for the above staff to facilitate attendance at the CESA 3 **Discovery Institute Fieldtrip on November 20, 2014.**

Total Amount claimed for reimbursement: _____

District Administrator: _____ **Date** _____

Business Manager: _____ **Date** _____

Please scan/email/fax to Diane Alm dalm@cesa3.k12.wi.us - Fax: 822.3828

