

Student Form for Chromebooks Reimbursement from School to District

REMIT TO:
THE SCHOOL DISTRICT OF ESCAMBIA COUNTY
ATTN: REVENUE DEPARTMENT
75 North Pace Blvd.; Pensacola, FL 32505

List the Student ID Numbers and service tag numbers with the reimbursement amount in the appropriate column. You will only enter an amount in one column. Please include this form with the check.

DO NOT combine with reimbursements for student damaged textbooks. Separate checks must be issued for Chromebooks and textbooks.

School Name: _____
Prepared by: _____
Date: _____
Check Number: _____

Student ID Number	Service Tag #	Dollar Amount of Chromebook Repair Cost	Dollar Amount of Chromebook Replacement Cost	Student Total
Example 123456	AB12CD2		\$212.25	\$212.25

Subtotal

Check Total

Authorized Signature: _____