

PEPC request for CTE Funds reimbursement

Note: Please use separate form for each invoice

ISD _____ County District # _____

ISD Contact _____ Date _____

Vendor _____ Invoice # _____ Amount _____

Description of expenditure and please explain how it is innovative and enhances your CTE Program:

Classroom to be used _____ Teacher _____

Note: Please forward the following to: Laurice Marshall, Union Grove ISD, Fiscal Agent for PEPC, PO Box 1447, Gladewater, Texas 75647 (903-845-5509).

Include ISD letterhead detailing the reimbursement request, a completed copy of the "PEPC request for CTE Funds reimbursement" form for each invoice and a copy of the district check showing payment to vendor. Thank you in advance for helping us document the use of Perkins funds throughout our consortium and lessening concerns in a potential TEA audit.