

# MATCHING REQUEST

*Library and School Equipment*

Name of School \_\_\_\_\_ Date \_\_\_\_\_

Treasurer's Name and Address \_\_\_\_\_

**Vouchers Paid** - Be sure to number them and include with this form

**AMOUNT**

1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

**TOTAL**

Number of Full Time Teachers \_\_\_\_\_ x \$50.00

School needs to spend amount equal to \$100.00 per room.  
Conference Education Office will then reimburse school  
to amount of \$50.00 per room.

\_\_\_\_\_  
*Superintendent's Signature*

Example: 4 room (teacher) school needs to spend \$400.00  
and will be reimbursed \$200.00 by Conference Education  
Department.

\_\_\_\_\_  
*Principal's Signature*

**(Be sure to include paid vouchers listed in order and numbered accordingly.  
Make out in duplicate and keep one copy in your file.)**