

**APPAREL CHECKLIST**  
**Accounting Department**  
**Lincoln Public Schools • Lincoln, Nebraska**

Date: \_\_\_\_\_

Department/Club Name: \_\_\_\_\_

Apparel Item: \_\_\_\_\_

• **Was this purchase for staff?** ..... Yes ..... No

- if yes, did you get prior approval and include the staff appeal form with your invoice? ..... Yes ..... No

• **Was this purchase for students?**..... Yes ..... No

- if yes, were the students assigned a fee in Synergy for the item?... Yes ..... No

- if the students were not assigned a fee, was this purchase fundraised for?..... Yes ..... No

- if the students were not assigned a fee in Synergy, did they reimburse you for the item?..... Yes ..... No

Additional Information: