

# Statement of Purpose Accountability Report

*Teacher's  
Choice*

SCHOOL YEAR \_\_\_\_\_

**Please print or type all information except signatures**

PARTICIPANT INFORMATION	TEACHER'S NAME		FILE NUMBER
	SUBJECT AREA/OFFICE ASSIGNMENT		
	DISTRICT NUMBER	SCHOOL NUMBER AND NAME	\$ AMT OF ALLOCATION

PARTICIPANT'S STATEMENT OF PURPOSE	<p>I certify that I will comply with the regulations and procedures contained in the "Teacher's Choice Purchasing and Accountability Guidelines". I understand that I will use Teacher's Choice funds disbursed to me for the purchase of instructional materials or basic supplies for use in my classroom or office assignment. A summary description of supplies I intend to purchase is listed below. I agree that I will complete Accountability section of this form and submit the completed form with commercial invoices and/or itemized receipts to the school principal or designee.</p> <p>PLEASE PROVIDE A GENERAL DESCRIPTION OF INSTRUCTIONAL MATERIALS/BASIC SCHOOL SUPPLIES TO BE PURCHASED:</p>	
	_____ Signature of Participant	_____ Date

**COMPUTER SUPPLIES/SOFTWARE  
BEING PURCHASED FOR USE ON PERSONALLY OWNED COMPUTERS  
(PRINTERS, SCANNERS & OTHER COMPUTER ACCESSORIES ARE NOT PERMISSIBLE)**

PRINCIPAL'S AUTHORIZATION	<p>A summary description of the computer related materials I plan to purchase for use on my personally owned computer and the intended use of these materials is listed below:</p>	
	_____ Signature of Participant	_____ Date
	<p>The computer related materials listed above and their intended use comply with the regulations and procedures contained in the "Teacher's Choice Accountability Guidelines".</p>	
	_____ Signature of Principal	_____ Date

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DEPARTMENT OF EDUCATION  
OFFICE OF THE CITY OF NEW YORK  
DIVISION OF FINANCIAL OPERATIONS

**Please print or type all information**

PARTICIPANT'S ACCOUNTABILITY REPORT	I have attached detailed commercial receipts for the materials listed below. All of the items conform to the general descriptions included in my statement of purpose.			
	DATE OF PURCHASE	VENDOR NAME	SUMMARY OF ITEMS PURCHASED <small>if receipt/invoice does not provide a detailed listing of items – please list items purchased here. If receipt lists individual items a general description will suffice.</small>	COST
	All of the above listed basic supplies and instructional materials have been brought or will be brought to the school for use in my classroom or office assignment by _____ (enter date). \$ _____ _____ SIGNATURE OF TEACHER'S CHOICE PARTICIPANT  All materials brought into school and full Accountability Report and receipts submitted.  _____ SIGNATURE OF PRINCIPAL	SUB TOTAL.....\$ _____  Amount contributed to school.....\$ _____  Reimbursement check made out to the NYC Department of Education for unspent portion of allocation submitted to principal....  GRAND TOTAL.....\$ _____ (Must equal \$ value of allocation)		