REQUIRED SERVICES REIMBURSEMENT FORM School Year: 2019-2020

Contact Person: DeEtte Loyd	Zip Code: 71302	City: Alexandria	Address: 141 Middleton Dr.	Name of School: University Academy of Central LA	Federal ID #: 47-2198643	Ed Finance ID #:
Contact E-mail:	Fax Number:	Phone Number:	School Administrator:	Name of Diocese:	Name of Civil Parish:	Site Code:
deette.loyd@uacenla.com	318-427-0123	318-427-0123	DeEtte Loyd		Rapides	619001

			Pup∥ Attendance	Record Maintenance	Nonpublic Data Collection	Transportation	Safety	Teacher Certification
TOTAL REQUESTED: \$204,369 \$23,502 \$134,994	TOTAL REQUESTED:	\$204,369	\$23,502	\$134,994	\$5,390	\$14,326	\$7,665	\$12,250

I hereby certify that the activities for which reimbursement is requested are mandated by State Law or regulation or requirement of a state department, state agency, or local school board; are not an integral part of the teaching process; were actually performed by employees of this school, and understand that false statements will be subject to civil and criminal penalties.

Administrator's Signature:

9/14/20

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NAME	Annual Salary	Hourly Rate	Hours of Service	Pupil Attendance	Hours of Service	Record Maintenance	Hours of Service	Hours Record of Maintenance Service Nonpublic School of Topics Nonpublic School of Topics Nonpublic School Service	Hours of Service	ransportation	Hours of Service	Safety	Hours of Service	Teacher Certification	Hours of Service	Continuing Education
Administrators (2000 hours/year)												10000	4 2			No. of Parties
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2 Craig Waltington	\$47,750.00	\$23.88	56.00	\$1,357	370.00	\$8.834	0.00	\$0	124_00	\$2.961	39.25	\$937	0.00	90	11.00	\$263
Lauren Davis	\$43,000.00	\$21.50	59.00	\$1,269	536.50	\$11.535	0,00	50	0.00	50	4.00	\$86	0.00	\$0	27,00	\$257
4 Lindsay Magaillon	520,000 00	\$14.00	148.00	\$2,044	1052.00	\$14 728	0.00	-\$0	000	so	4.50	\$63	00.0	\$0	00.13	\$154
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2 Marqueltiea Henry	\$37,000.00	\$37.37	24 00	\$897	86 00	\$3,214	0.00	\$0	14.50	\$542	4.50	\$168	0.00	90	11.00	\$411
a Leah Ellison	\$35,000.00	\$8.26\$	24 00	\$848	36.00	\$3,040	0.00	\$0	14 50	\$513	100	\$159	0.00	\$0	11.00	\$389
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5 Joesph Gallow	\$37,000,00	\$37,37	24:00	\$897	86.00	\$3,214	0.00	\$0	14.50	\$542	4.50	\$168	9,90	0.5	11,50	\$412
6 Nick Gonzague	\$5,000.00	\$5.05	3.00	\$15	27 00	9ETS	0.00	50	130 50	\$659	38 75	5196	9.00	SO	#1.00	\$56
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9 Sara Smith	\$39,000,00	\$39.39	24.00	\$945	\$6.00	886.63	0.00	so	14 50	\$571	HIGH	\$177	0.00	50	11,00	\$45
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11 Anna Wilson	538,000.00	\$38.38	24.00	\$921	86.00	\$3,301	00.0	50	13 50	\$518	3.50	\$173	9.00	\$0	15.00	S 42
12 David Morgan	\$44,450.00	\$44.90	24.00	\$1,078	86.00	\$3,861	0.00	20	15,00	\$673	4.50	5202	9.00	So	11,00	5494
13 Kara Worsham	\$46,500.00	\$46.97	24.00	\$1,127	315.00	\$14,795	0.00	Sp	14.50	5681	450	. \$211	0.00	\$0	31.00	5517
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REQUIRED SERVICES SUMMARY TIME RECORD FORM

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11.00	Continuing Education		
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		2019-2020	CONTRACT TOOL

I hereby certify that I actually performed the services for which reimbursement is sought and that the information submitted by me is true and accurate.

Note: This form and all supporting documentation are considered public record under LR.S. 44:1 and

Employee's Signature

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Employee's Signature

Note: This form and all supporting documentation are considered public record under LRS. 44.1 and 44.31.

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Note: This form and all supporting documentation are considered public paper under L.R.S. 44.1 and 44.31.

Prepared by the Office of State Finance & Pales Contillant Distributed Education

Employee's Signature

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Date: This form and all supporting documentation are considered suplic record under L.R.S. 441 and 44.31.

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Note: This form and all supporting documentation are complicated buyls: record under L.R.S. 44.1 and 44.31.

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Employee's Signature

Note: This form and all supporting documentation are con 10 Date 9 14 30

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Employee's Signature Note: This form and all supporting documentation are considered but ard under LR.S. 44.1 and 44.31.

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Employee's Signature

Note: This form and all supporting documentation are considered public years under LR.S. 44.1 and 44.31.

Prepared by the Office of State Finance & Post-Abdistanta Detailment of Education

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Note: This form and all supporting documentation are considered public record under L.R.S. 44.1 and 44.31.

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Prepared by the Office of State Finance & Policy/Louisiana Department of Education

Employee's Signature

Note: This form and all supporting doc

ation are considered public record under LR S. 44.1 and 44.31.

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REQUIRED SERVICES SUMMARY TIME RECORD FORM

is true and accurate. I hereby certify that I actually performed the services for which reimbursement is sought and that the information submitted by me

Note: This form and all supporting documentation are considered public record under L.R.S. 44:1 and

Englogae's signature

9 14/20 Date

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Confinuing Education	Teacher Certification	Safety	Transportation	Annual Data Collection	Nonpublic School	Record Maintenance	Pupil Attendance	DATE		Title	Employee's Name: Craig Whitington	School Name: University Academy of Central LA	
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Employee's Signature Date 9 14 20.

Note: This form and all suppopulse decliniquistion are sometimes produce record under LR.S. 441 and 44.31.

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Continuing Education	Teacher Certification	Safety	Transportation	Annual Data Collection	Nonpublic School	Record Maintenance	Pupil Attendance	DATE		Title	Employee's Name: Grain Whatenam	School Name: Unwernly Adapting of Control L4	
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Employee's Signature

Note: This form and all supporting

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Continuing Education	Teacher Certification	Safety	Transportation	Annual Data Collection	Record Maintanance	Pupil Attendance	DATE		Title	Employee's Name: Craig Whitington	School Name: University Academy of Central LA	
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Note: This form and all supporting decommentation are considered public record under L.R.S. 44.1 and 44.31.

Prepared by the Office of State Finance & PolicyLouisiana Department of Education

Employee's Signature

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Continuing Education	Teacher Certification	Safety	Transportation	Annual Data Collection	Record Maintenance	Pupil Allendance	DATE		Tittle	Employee's Name: Crain Whitington	School Name: Unversity Administrated Control of	
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Employee's Signature

Date 9 14 20

Note: This form and all supporting documentation are consistence public record under LR.S. 44.1 and 44.31.

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Continuing Education	Teacher Certification	Safety	Transportation	Annual Data Collection	Secord Maintenance	Pupil Attendance	DATE		Titl	Employee's Name: Chie Whitmosh	School Name: University Audemy of Certain U.	
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Employee's Signature

Note: This form and all supporting documents

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Employee's Signature Note: This form and all supporting documentation are considered public record under L.R.S. 44.1 and 44.31.

Date 9/14/30

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Employee's Signature

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Note: This form and all supporting documentation are considered public record under L.R.S. 44.1 and 44.31.

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Employee's Signature

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Employee's Signature

Note: This form and all supporting docu

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The hours documented above represent the actual amount of times dedicated to providing services which are required and eligible for reinbursement.

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Note: This form and all subjections extraveluration are considered public record under L.R.S. 44.1 and 44.31.

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Note: This form and all supporting documentation are considered public record under L.R.S. 44.1 and 44.31.

REQUIRED SERVICES SUMMARY TIME RECORD FORM

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I hereby certify that I actually performed the services for which reimbursement is sought and that the information submitted by me is true and accurate.

Note that the information are considered public record under LR.S. 44:1 and

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Note: This form and all supporting documentation are considered public record under L.R.S. 44.1 and 44.31.

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Note: This form and all supporting documentation are considered public record under L.R.S. 44.1 and 44.31.

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Note: This form and all supporting documentation are considered public record under L.R.S. 44.1 and 44.31.

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Note: This form and all supporting documentation are considered public record under L.R.S. 44.1 and 44.31, Date 09/14/2020

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Note: This form and all supporting documentation are considered public record under L.R.S. 44.1 and 44.31.

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Note: This form and all supporting documentation are considered public record under L.R.S. 44.1 and 44.31,

Employee's Signature

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Note: This form and all supporting documentation are considered public record under L.R.S. 44.1 and 44.31.