

Worker Name: _____
 Worker # _____ Case #: _____
 Student Name: _____
 Student I.D.: _____

BOOKS AND SUPPLIES VERIFICATION

Semester: _____

Important notice for all CalWORKs students:

- PLEASE MAKE SURE TO SAVE ALL RECEIPTS from your books & supplies. Your Employment Counselor may request your receipts.

Initial here & date above

The following information is being provided to verify what books/supplies the student will need.

Course	Book Title/Supply Item	Book/Supply Cost (w/o tax)
	Total	

Do you need a parking permit? Yes No

<p>FOR OFFICE USE ONLY</p> <p>From: _____</p> <p>Date: _____</p>	<p>Sub Total: _____</p> <p>Tax (____% X ____): _____</p> <p>Parking Permit: _____</p> <p>Printing Fees: _____</p> <p>Student Health /Body Fees: _____</p> <p>AC Transit Easy Pass: _____</p> <p>Total Cost: _____</p>
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