

CLOTHING REQUEST

NAME: _____

DATE: _____

WORKER #: _____

REASON FOR REQUEST: _____

ITEM	PRICE EACH	TOTAL PRICE	STORE

TOTAL NUMBER OF ITEMS: _____ TOTAL FOR ITEMS: \$ _____

ESTIMATED TAX: \$ _____ (7.25% San Benito, 8.25% Santa Clara, 7.25% Monterey Counties)

GRAND TOTAL: \$ _____

COMMENTS: _____

**YOU MUST TURN IN YOUR RECEIPTS TO
YOUR WORKER IMMEDIATELY**