CalWORKS/GAIN Office 18111 Nordhoff Street, 130 Bayramian Hall Northridge, CA 91330-8239 (818) 677-5874 Fax (818) 677-**6787**



Book Re	quest Form	□ Fall	🗆 Spring	□ Summer	□ Winter	
Case Number SI		SID	SSN			
Participant N	ame					
Request Date			Peguest Add D	ate (use only if adding	ı to	
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Major/Program			Enrollment Date	Enrollment Date		
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with the bo attached to	ok price from book l this request.	listing/booksto	ore. <i>Note:</i> All re	equests for reimburs	course name, and title of t sements must have origina	I receipts
Expense	Course Name		Book Description/Title		Amount	Tax
Type Book					(excluding tax)	
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Other						
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				Sub Totals		
				Grand Total		
Certification	ı: I certify that all of	the above is	true and correct:			1
Participant's Signature		Date		CalWORKs Representative Signature		 Date