Reimbursement Form

Procedure: 1.) Receive permission from R.E.A.C.H. to purchase materials
2.) Purchase and receive materials
3.) Turn in this form along with receipt(s).

For Office Use:

P.O. # _____

Vendor #_____

Account # _____

Date Entered _____

Please fill out:

Family Name _____

Address _____

_____

Phone _____

FAX _____

(NOTE: Each request must have a copy of all original receipts attached. Allow 4 weeks for processing. All materials must directly relate to E.L.P.)

Subject Area/Topic of Study from E.L.P. (Please be specific!)	Name of Company	Child's name	Description of materials	Total Price	Invoice Attached
			Total to be reimbursed:		

I verify that I purchased and received the above materials. These materials are a part of my child's curriculum and directly relate to the E.L.P. which I created for my child(ren).

Parent Signature_____ Date_____
R.E.A.C.H. Staff Initial:_____ Date:_____