

***HOME AND SCHOOL ASSOCIATION
REIMBURSEMENT REQUEST***

Date_____

Name_____

Contact Phone_____

Address to send to_____

Amount_____

Purpose_____

*Please staple all receipts to this request and
place it in the Home and School Mailbox located
in the school office attention H & S
Treasurer.*

Thank You,
Lynn Pilewski
jmrpilewski@msn.com
215-412-0607