Home & School Reimbursement Form

- Please attach all receipts to this form.
- Submit form to school office.
- Please submit request for advancements at least 2 weeks prior to the date payment is need.
- Any questions can be addressed to contactus@spxhomeandschool.com

Type of Request: ☐ **Reimbursement** ☐ **Advancement** ☐ **Pay to Vendor**

Name: _____

Address: _____

Telephone: _____

Email: _____

Reason for Request:

Explain reason for your request, include the name of the SPX group, event, activity, or project involved.

_____

_____

_____

Itemization: **Attach a summary of expenses and vendor details OR fill out form below.**

Expense Amount	**Vendor Name**
_____	_____
_____	_____
_____	_____

Total Amount Requested: $_____

Name & Address of Person or Vendor Receiving Payment:

Name: _____

Address: _____

_____

Requestee Signature: _____ **Date:**_____