

## PARENT DIRECTED REIMBURSEMENT FORM

Black Gold Home-Based School 5204 50 Ave., Unit 102 Beaumont, AB. T4X 1E3 780-929-5784 <u>hbs@blackgold.ca</u>

Your Children The				
This form I	must be completed and	handed in before <b>June 1st</b> of e	<mark>ach school</mark> y	<mark>⁄ear.</mark>
School Year:	_ Date:	Reimbursement max	kimum per s	tudent: <u><b>\$850.00</b></u>
Name of Parent/Guardiar	າ:			
Name of Student(s) for w	hich materials were pur	chased:		
Mailing Address:				
Please Note: Attached of the North N	you seek reimbursemen (their letterhead) ed, course taken or serv	t. Please do not include perso	onal purcha	ses.
5. The total cost you paid	b			
<b>6.</b> The GST and GST nur		# if the receipt does not show the GST#	the item can	not be processed.
Agency/ Supplier	Item	Educational Purpose	GST	Total Cost
		-		
		TOTALS: S	\$ \$	<b></b>

Parent/Guardian Signature Home-Based Education Coordinator Signature