



Please attach original, detailed receipts with the name of the program, facility, instructor's name, contact info and qualification. Receipts and invoices must show **paid, or balance of zero.**

Area of Study on SLP	Page Number on SLP	Date of Purchase	Item Purchased and Where/Who Purchased From	Price Before Tax (include shipping)	Tax	Total
Per Sheet Total:						

*\*Reimbursement form(s) must be received in the office by May 1st. Late forms will not be accepted. Parent funds that remain unclaimed by May 31st will be carried over to the next school year.  
Contact [reimbursement@koinonia.ca](mailto:reimbursement@koinonia.ca) for more information.*