

Child Care Reimbursement Receipt of Payment

All reimbursement requests must be postmarked by the fifth day of each month. Complete a **separate reimbursement request for each child and/or child care provider**. Each reimbursement request **MUST** be completed in its entirety. All incomplete reimbursement requests will be returned, which may result in delay of reimbursement.

To be completed by the parent: (Please print)

Child's full legal name: _____

Child's date of birth: _____ (Eligibility ends on child's 13th birthday)

Parents' names: _____ and _____

Street address: _____

City, state and zip: _____

Phone number: _____

E-mail address: _____

Reason for Child Care Reimbursement: Employment Education

To be completed by the child care provider: (Please print)

Provider's name: _____

Provider's full address: _____

Provider's phone number: _____

Provider's relationship to child _____

Type of child care: Family Center In-home

Dates of service: (i.e., from Jan. 1, 2010 to Jan. 31, 2010) from _____ to _____

Total number of units: _____ Hour(s) or _____ Day(s) or _____ Week(s)

Total amount paid to child care provider: \$ _____

Date payment was made to child care provider: (xx/xx/xxxx) _____

The following **are not** reimbursable: field trip, transportation, lunch or late payments.

Read Carefully

By signing this form you certify that all expenses for which reimbursement of payment is claimed by submission of this form, you fully understand that you alone are responsible for the sufficiency, accuracy, and veracity of all information relating to this claim.

By signing this form you understand that, in order to prevent fraud, you may be audited by the Adoption Assistance program. You will need to save your receipts for expenses you are requesting reimbursement for. If a receipt or documentation is needed you will receive notification from the Adoption Assistance program. If a receipt is not provided you may be subject to re-payment of the funds.

Parent signature:

Please Print Name

Date signed

(only one parent must sign)