



Children's Home of York
77 Shoe House Road
York, Pennsylvania 17406
P: 717-755-1033 F: 717-840-3791

Resource Family Expense Reimbursement

ATTACH ALL RECEIPTS TO THIS FORM OR INDICATE WHY RECEIPT IS MISSING.

Date	Description of Expenditure and Purpose	Child's Name	Amount

ATTACH ALL RECEIPTS TO THIS FORM OR INDICATE WHY RECEIPT IS MISSING.

Resource Parent Signature

Date

Caseworker Signature

Date

Resource Parent Name Printed

Caseworker Name Printed

PLEASE DO NOT WRITE BELOW THIS LINE. FOR ACCOUNTING DEPARTMENT USE ONLY