# ACE Receipt for Instruction Provided in _____ (month)

**ACE Student's Complete Name** (one student per receipt)**:** _____

**□ Full-Time Student** **□ Part-Time Student**

**Teacher/Coach's Complete Name** (please print)**:** _____

**Teacher/Coach Phone Number:** _____

**NCES Code** (part-time only): _____ (once course per receipt)

| Sample Entries | | |
|---|---|---|
| **Date of Class** | **Description of Class** | **Amount** |
| 9/22/2012 | Ballet class | $40.00/month |
| 9/29/2012 | " | " |
| 9/16/2012 | OMSI student admission | $12.00 |
| | | |
| **Date of Class (NOT payment date)** | **Description of Class** | **Amount** |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | **Total Paid for This Month's Classes only** | |

_____**(Name)** _____**(Date)**

**Teacher's signature verifies classes listed above were held & payment was received.**

**Date of Payment**: _____

**Payment method (check one):**
**□ Cash**
**□ Credit Card**
**□ Check No. _____**
**□ Other _____**

**Send Reimbursement to:**

_____ (Parent name)

_____ (Mailing address)

_____ (City & zip code)