

NEPTL Gift Card Documentation Form
Nutrition Education Project- SFUSD
2012 –2013

1. Complete form and submit with original receipts at NEPTL Meeting #3 & NEPTL Meeting #5, or send through School Mail to Donna Gurr, School Health Programs (Do not fax)
2. Make a copy of form and receipts, for personal records.
3. List amounts of receipts individually.
4. Circle amount purchased on gift card and the gift card number on the receipt.
5. Submit receipts even for cards which have remaining balances.

Name _____

Date Submitted _____

Card #	Store*			Denomination				List Receipt Amount
	TJ	Sw	WF	\$10	\$25	\$50	\$100	
								#1:
								#2:
								#3:
								#4:
								#5:
								#1:
								#2:
								#3:
								#4:
								#5:
								#1:
								#2:
								#3:
								#4:
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								#1:
								#2:
								#3:
								#4:
								#5:

*TJ = Trader Joe's; SW = Safeway; WF = Whole Foods