

St. Therese Church

7 Hunter Street, Succasunna, New Jersey 07876
Phone 973-584-8271 Fax 973-584-0684
E-mail: StThereseOffice@optonline.net

Fingerprint / Criminal Background Check Reimbursement Form

Revised: December 16, 2009

Please reimburse me for the fees associated with fingerprinting:

Please note that \$11 fees for missed appointments are not reimbursed.

PRINT CLEARLY:

Date of Request:	
Name:	
Address:	
City / State / Zip	
Phone (daytime)	

- Attach a copy of the **MorphoTrak Inc. Universal Fingerprint Form**
- Attach original receipt (you will receive this when you are fingerprinted)

Reimbursement Amounts: (please check your status)

- Parish Volunteer \$26.25
- Parish Employee \$60.25
- St. Therese School Teacher/Employee \$70.25

Reimbursement will be mailed to the address you indicate above in approximately 2 weeks.

FOR OFFICE USE ONLY:	
Reimbursement Approved:	
Department:	
Check Number:	
Date Mailed:	