

i	Student Legal Last Name
Applicant/Legal Guardian First Name	Applicant/Legal Guardian Last Name
enses (If not Applicable, Leave Blan	nk)
1) Private School Expenses	•
A) Tuition	
School Name:	Tuition Paid: \$Payment Date:
Payment Method: 🗆 Pa	ayPal □ Point of Sale □ Web Based/Phone □ Square/Venmo/Othe
Payment □ W Frequency:	/eekly □ Bi-Weekly □ Monthly □ Semester □ Quarterly □ Annual
B) Fees	
<del>_</del>	gistration fee
Amount Paid: \$	Payment Date:
Payment Method: 🗆 F	PayPal □ Point of Sale □ Web Based/Phone □ Square
<u>Fee Type 2:</u> ☐ Registrat	ion fee □ Facility fee □ Lab fee □ Credit Card Processing fee
☐ Applicati	cion fee □ Facility fee □ Lab fee □ Credit Card Processing fee on fee □ Book fee □ Tutoring fee □ Enrollment fee □ Other (Specify):
□ Application	cion fee
☐ Application  Amount Paid: \$	cion fee
☐ Application  Amount Paid: \$	cion fee



	Textbook:	Amount Paid: \$
	Textbook:	Amount Paid: \$
	Textbook:	Amount Paid: \$
	Textbook:	Amount Paid: \$
D) Uni	form (Required By and Purchased Thro	ugh School)
	Total Payment Amount: \$	
	g Services – Academic Subjects, includ	ng Art, Foreign Language and Music
A) Tuto		
	Payment Date:	
	Payment Method: ☐ PayPal ☐ F	oint of Sale ☐ Web Based/Phone ☐ Square
	Payment Facility:	Payment Amount: \$
	Name of Tutor:	Subject:
	Credential Type:   Bachelor'	Degree or higher ☐ State Teaching Certificate
	☐ State Sub	citute Teaching Certificate
	$\Box$ Checking this box assures th	t I have verified credentials and documents are attached
B) Tuto	or 2	
	Payment Date:	
	Payment Method: □ PayPal □ F	oint of Sale
	Payment Facility:	Payment Amount: \$
	Name of Tutor:	Subject:
	Credential Type: ☐ Bachelor'	Degree or higher

**Use Addendum sheet to add additional Academic Tutors** 

**Continue on next page for Extra-Curricular Tutors** 



C) Tutor 3					
Payment Date:					
Payment Method: ☐ PayPal ☐ Poi	nt of Sale	☐ Web Based/Phone	□ Square		
Payment Facility:		Payment Amount: \$			
Name of Tutor:		Subject:			
Credential Type: ☐ Bachelor's D	Degree or high	er State Teaching/	Substitute Teachir	g Certificate	
☐ Subject-spec	cific Credentia	al (Specify):			
$\ \square$ Checking this box assures that	I have verifie	d credentials and docume	ents are attached		
Use Addendum	sheet to add	additional Extra-Curricu	lar tutors		
Curricula					
A) Curriculum Order 1					
Payment Date: Total Payme	ent Amount: <b>\$</b>	Vendor:			
Payment Method: ☐ PayPal ☐ Poi					
•		·	·		
a) Curriculum, as listed on Invoice  Name of Curriculum	Grade Leve	I Subjec	rt	Price	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
b) Supplemental Material					
Required by (Curriculum Name)		Name of Item	Pri	ce	
		•	\$		
			\$		
			\$		
			\$		

c) Taxes and Shipping: Payment Amount: \$



B) Curriculum Order 2

# EMPOWERMENT SCHOLARSHIP ACCOUNT 2017-2018 EXPENSE REPORT GENERAL EXPENSE REPORT

Payment Date:	Total P	ayment Amo	unt: <b>\$</b> _		Vendor:		
Payment Method: 🗆 🛭	PayPal	☐ Point of Sa	le [	Web Based	Phone	☐ Square	
a) Curriculum, as listed on	Invoice						
Name of Curriculum		Grade Level			Subject		P
							\$
							\$
							\$
							\$
							\$
-							\$
							\$
h) Complemental Mark (Col		1		•			1
b) Supplemental Material  Required by (Cu		ne)	Name of Item		I	Price	
		,			\$	7	
						\$	
						\$	
						\$	
c) Taxes and Shipping: Pa	umant Amou	nt: <b>¢</b>					
c) Taxes and Shipping. Fu	yment Amoui	<b>&gt;</b>					
	Use Ac	ddendum she	eet to a	dd additiona	Curricula		
nline Private Program							
) Tuition							
Program Name:	me:		Tuit	ion Paid: \$		_ Payment l	Date:
\ Foos (as shown on Invoiso)							
Fees (as shown on Invoice)  Name of Fee:			Tuition Paid: \$ Payment Do		ate•		
			raicion			r dymene z	
) Required Textbooks/Curric	culum						
Name:					Amoui	nt Paid: <b>\$</b>	
Name:					Amoui	nt Paid: <b>\$</b>	
Name:					Amoui	nt Paid: <b>\$</b>	
Name:					Amoui	nt Paid: <b>\$</b>	



) Testing Fee for Placemer	nt/Admission Exams related to	College		
Payment Date:		Test Date:		
Payment Method:	☐ PayPal ☐ Point of Sal	e □ Web B	ased/Phone	□ Square
Payment Facility:		Payment Am	ount: \$	
Test Name: ☐ American College Test (AC☐ Stanford Achievement Tests of Academic Proficie☐ TerraNova		SAT) □ lo y (TAP) □ M	sic Skills (ITBS)	
Post-Secondary Institution	on (University, College, Trade o	r Vocational Sch	ool in Arizona)	
A) Tuition  Institution Name:		Tuition Paid	d: \$	Payment Date:
B) Fees  Name of Fee 1:			Amount	Paid: <b>\$</b>
Name of Fee 2:				
Title: Title:			Amount I	·
Title:			Amount I	·
Title:			Amount I	<u>-</u>
D) Placement / Admission	ons Test			•
Test Name:		_	Test Date	:
Amount Paid: \$		_		
Bank Fee for ESA Accoun	t			
a) Bank Fee 1				
Payment Date:		Payment Am	nount: <b>\$</b>	
Fee Type: ☐ Repl	acement Card (Lost or Stolen)	☐ Expedited Se	rvice Fee	
b) Bank Fee 2				
Payment Date:		Payment Am	nount: <b>\$</b>	
Fee Type: ☐ Repl	acement Card (Lost or Stolen)	☐ Expedited Se	rvice Fee	



# 8) Services from a Public School

Payment Date:		Payment Amount: \$				
Payment Method:	□ PayPal □ Poin	☐ Point of Sale ☐ Web Based/Phone ☐ Square		9		
			School:			
Course Title:		Subject:		Grade Level: _		
ner goods and services	(Reading books, field	trips, allowable kits)				
em Title/Name:	Category:		Date Purchased 8	& Cost:		



#### **EXPENDITURE – ATTESTATION FORM**

Pursuant to Arizona Revised Statutes § 15-2402 & 15-2403, as the ESA contract holder, I certify that:

- 1) All funds have been spent for the lawful benefit of the qualified student as authorized in Section 3 of the Empowerment Scholarship Agreement.
- 2) I understand that the Arizona Department of Education is authorized to audit all expenditures and may:
  - a. Suspend an ESA account or remove a parent for misspending;
  - b. Require repayment of misspent funds before releasing additional monies;
  - c. Refer gross misspending for further investigation to the Attorney Generals' Office that may result in a civil judgment or criminal indictment.
  - 3) I understand it is a violation of ESA policy to retain the services of a family member or ESA card holder as a therapist, tutor or aide.

ESA Application #:		
Parent Name ( <i>Print</i> )	Signature	Date

Submission is not considered complete without all supporting documentation (receipts, invoices, credentials, etc.)

Send completed Expense Report and required documents to:

🍱 Mail

Email:

Arizona Department of Education Attn: ESA 1535 W. Jefferson Street Bin #41 Phoenix, Arizona 85007 esa@azed.gov