

Selwyn Elementary School

Tip Reimbursement Receipt

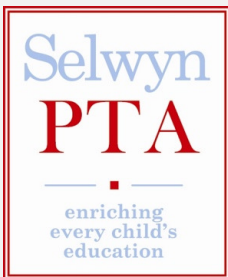
I, _____ (name) gave _____
a \$ _____ tip for _____ on _____ (date)

Committee: _____

Signature: _____

Print Signature: _____

Witness: _____



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