

San Francisco Archdiocese Catholic Scouting
Reimbursement of Uniforms/Supplies Request

Name of Scout : _____

Name of Parent : _____

Address : _____

Phone # : _____

Unit or Troop # : _____ Amount : \$ _____

Please check one :

_____ Girl Scout _____ Cub Scout _____ Boy Scout

_____ Venture Crew _____ Campfire

Parish : _____

Parent Signature

Date

Please attach receipt and mail to:

Amanda George
The Archdiocese of San Francisco
Catholic Scouting Committee
1 Peter Yorke Way
San Francisco, CA 94109

Questions: 415-614-5595