



Milford Exempted Village Schools
1099 State Route 131
Milford, Ohio 45150
Phone: 513-831-1314 Fax: 513-965-6159

Dear Parent/Guardian,

Our records show that your child has outstanding supply fees. The fees cover consumable materials purchased by the school for student use including workbooks, planners, etc.

Please complete the bottom portion of this letter indicating your intentions and return it to the school office as soon as possible. Checks should be made payable to **Milford Schools**. Please include your child's name and student ID number on your check. If you are unable to pay the fees at this time, please contact the school office to make arrangements for additional time or to arrange a payment schedule. We appreciate your prompt attention to this matter.

Please complete and return
 (Please return form to building secretary or Jennifer Burton at the Board Office)

Student Name: _____

Parent Name: _____ Parent Phone: _____

_____ Payment is attached.

_____ Partial payment is attached.

_____ Student received or is receiving Medicaid benefits. Please attach verification of Medicaid assistance. Return this completed form to your child's school to the attention of Jennifer Burton - BOE. Without verification fees cannot be waived.

Check the appropriate box(es):

- | | | |
|-------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> 21/22 Fees | <input type="checkbox"/> 19/18 Fees | <input type="checkbox"/> 18/17 Fees |
| <input type="checkbox"/> 20/21 Fees | <input type="checkbox"/> AP Exam Fee Reduction | |