

## Office of Special Finance

440 North Broad St. 3rd Floor, Portal D Philadelphia, PA 19130

Philadelphia, PA 19130 Phone: 215-400-4170,Option 2 Email: Compedu@philasd.org

## TECHNOLOGY ORDER FORM FOR COMPENSATORY EDUCATION

Student Name:			Da	ate of Order:		
Student ID:			Ore	der Number:		
Student D.O.B:			Order Total:			
arent / Guardian Name:				ng Address		
Phone:			Stre	etAddress:		
Email:		City, State Zip Code:				
						<b>"</b>
Home de	elivery only!					
Description	on of Item	Ite	m Number	Cost per Item	Qty	Amount
				т	OTAL COST:	
By signing this doc	mont/report Leartify to	the best of my	, knowlodgo and h			
information is true,	ument/report, I certify to to complete, and accurate	e. I am awar	e that any false, f	ictitious, or		
traudulent informat civil or administrativ	ion, or the omission of an ve penalties for fraud, fals	ıy material fac se statement	ct, may subject me s, false claims or c	to criminal, otherwise.		
				De	arent Signatu	re