Kingdom Kids Adoption Ministries

Adoption Expense Reimbursement Form

Make Check Payable to: _____

Family name:_____ Phone (___) ____ - _____
Address: _____
City: _____ State: ____ Zip: _____

Receipt Number	Date of service	Description of Expense	Provider	Amt. in foreign currency (if applicable)	Exchange rate (on date of service)	Amount in US $	Office Use Only
0	10/21/07	Hotel while in Addis Ababa, Ethiopia - 5 nights	The Ghion Hotel	3200 birr	8.3 birr/$	$385.54	X

It is Kingdom Kids Adoption Ministries' preference that payment be made directly to organizations or agencies providing adoption services rather than to the adoptive family. We realize, however, that this isn't always practical or possible. When it becomes necessary for reimbursement to be sent directly to you please use this form to itemize your expenses. This will greatly expedite the process. Thank you.

Please make a copy of each receipt for your records and submit your original (numbered) receipts with this form to Kingdom Kids Adoption Ministries.

Note: Items available for reimbursement include:

1. Agency fees
2. Translation fee – if not included in agency fee
3. Home study fee
4. USCIS fee and fingerprinting
5. Visa and passport fees for parents and adopted child(ren)
6. International fees
7. Airline, Travel & Lodging for parents & adopted child(ren) only.
8. Required cash orphanage donation (contact us about how to submit this)
9. Post-Placement reports

Kingdom Kids Adoption Ministries can only reimburse for legitimate adoption expenses. Please contact Kingdom Kids Adoption Ministries if you have any question regarding what is a legitimate adoption expense which can be reimbursed. Items not eligible for reimbursement include, but are not limited to, goods donated to orphanage or workers; meals, taxi, etc., during travel; telephone calls; postage; clothes; purchase of a larger vehicle; or home renovation expenses. Please direct any questions regarding this process to Donna Bost, Director of Family Grants at DonnaB@KingdomKidsAdoption.org or call 509.465.3520.

Office use only: Date: _____ Amt: _____ Ck #: _____ Bal: _____ ‡ Date: _____ Amt: _____ Ck #: _____ Bal: _____ ‡ Date: _____ Amt: _____ Ck #: _____ Bal: _____

Revised 06/04/08