POST-Block Party Sheet

Contact Name: _____ Date of Party: _____

Address: _____ Neighborhood: _____

Phone: _____ How many neighbors: _____

Please write a brief paragraph **(8 sentences minimum)** highlighting your party. What made it special or anything funny that you would like to share. Please use the back page if you need more room to write.

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For your $400 reimbursement, please return the following within **2 weeks** after the party:

1. This form completed.

2. All receipts (excluding alcohol, gift cards, etc. refer to application for list) adding up to a max of $400. (Screen shots, bank stmts, gift receipts, etc. are not acceptable.) Each receipt must be legible and reflect date, amount of purchase, itemization of items, and company name/logo)

3. Six **(6)** pictures of your block party. **(Unable to accept videos or pictures of set-up or only food served).** We want to see the fun that everyone had.

****If you are e-mailing please be sure they are legible good quality. ****

Send these items via Email to: **Marcy.Maulorico@fsresidential.com**

OR

Mail to: Talega Swim & Athletic Club
Attn: Block Party
100 Calle Altea
San Clemente, CA 92673

You will receive your reimbursement check in about 21 business days by mail after confirmation of all the above items received and acceptable. During holiday season there could be delays.