

<p>TEXAS EDUCATION AGENCY Automated External Defibrillator (AED) Reimbursement Authorized by HB 1, Article IX, Section 19.86; General Appropriations Act, 80th Texas Legislature</p>
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Campuses with an AED purchased between June 1, 2007, and June 30, 2008, to comply with the Senate Bill 7 requirement to make available at each campus in the district at least one AED

3. Of the number of campuses indicated in question 1, identify each with an AED purchased between June 1, 2007, and June 30, 2008, purchased to comply with the aforementioned Senate Bill 7 requirement. In the grid below, list the campus name, physical address, and the eligible reimbursement amount*.

*The eligible reimbursement amount per AED is the actual cost of AED or \$1,475, whichever is less. A copy of the invoice must also be attached to this AED Reimbursement Form as supporting documentation of the purchase.

Attach additional pages as needed to list all campuses identified eligible for reimbursement.

Campus Name	Physical Address	Eligible Reimbursement Amount cost of AED or \$1,475*, whichever is less
Reimbursement Total		

Certification

I hereby certify that the information contained in this form is correct.

First and Last Name	Title	Signature
Phone Number	Fax Number	Date Signed
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Return one signed copy with original signature (with attached invoices) by mail or hand delivery to:
Texas Education Agency
Division of Formula Funding, Room 6-112
1701 North Congress Avenue
Austin, TX 78701-1494

These materials must be received by TEA no later than 5:00 p.m. central time, June 30, 2008.