

2024 LST Library Card Reimbursement Program

> Submit to the Township by mail or e-mail

1. Completed reimbursement form
2. Copy of your receipt from the library

Lower Saucon Township will process your request and mail a check for the reimbursement amount (\$20 for an individual or \$40 for a family card) to the address provided. If you have any questions, please contact the Township at 610-865-3291.

Mail

Lower Saucon Township
3700 Old Philadelphia Pike
Bethlehem, PA 18015

E-mail

info@lowersaucontownship.org
> In subject line please follow:
"your last name Library Reimbursement"



2024 Library Card Reimbursement

Name: _____

Address: _____

Phone #: _____

Library: _____

Library Card #: _____

Individual or Family: _____

Cost to Resident: _____

Date Submitted: _____

Approved: _____

Check #: _____

Date Mailed: _____

Application #: _____

* Township Use Only *