

1. Date request submitted ______ 2. Date of Training activity _____

CWC Patricia M. Thornton Local Chapter

Education Reimbursement Checklist

This section completed by Local Chapter President

3. Local Chapter	4. Local Chapter President
5. Amount of request: \$	6. Local Chapter President signature
7. Flyer attached	8. Education Voucher form attached
9. Expenses breakout attached	10. Receipts attached
11. Training Materials sent to website Administrator date sent	12. Sign-in Sheet attached
13. In-person online training Training Title:	Materials : Handout Book MP4 Recording PowerPoint Publication other
For Bybee Board Use Only:	
Date received: Approved Not Approved Date of response sent Comments:	
For Treasurer Use Only:	
Date Check # issued	Amount