						Send to:		
	Appalachian Mountain				Lennie Steinmetz			
Delaware Valley Chapter						1180 Greenleaf Drive		
						Bethlehem, PA 18017-		19
						E-mail: lead	E-mail: leadership@amcdv.org	
		Tra	ining Reimb	ursement Req	<u>uest</u>			
Payable to:	Payable to:		Receipts	Attached?		Submitted By:		
Mail to:			Yes	No		Approved By:		
Telephone:						Total:	\$0.00	
Course Description (1 course per line)		Completio Date	n Course Fee	Reimbursable Amount	Receipts Attached (Y or N)	Treasurer's Use only		
				\$0.00				
				\$0.00				
				\$0.00				
				\$0.00				
				\$0.00		Check Number:		
Instructions:								
1	Reimbursement is described in the Policy, Delaware Valley Chapter Training Reimbursement Program, available on the Chapter Website, www.amcdv.org. Eligible courses are those listed in the Policy.							
2	2 Items eligible for reimbursement are course fees, including registration and relevant lodging costs. Travel and meal expenses are excluded unless included in the registration fee.							
3	The reimbursement rate is 50% of for qualified leaders taking WFA (or each course. As	of 2/15, a tv	vo year pilot program will allow	up to \$300 co	mpensation
4	To be eligible for reimbursement, requirements of the Program (including Lead, Co-Lead, or Participate) must be completed within one-year before or after the date of training completion.							
5	Documentation to substantiate the amount of the Course Fee should be included. Examples include receipts, copies of canceled checks (with account numbers blacked out), credit card statements (with account numbers blacked out)							
6	Payments must be authorized by the Leadership Chair. Completed form should be sent to the Leadership Chair for approval (leadership@amcdv.org).							
7	Requests for Training Reimbursem	nent may be sent by	U.S. Mail or scar	nned and e-mailed	to the Lead	ership Chair at the above address	J.	
Feb. 2015								