

Reimbursement Request

PURPOSE: REV IT UP

Contact Information:

Name _____
 Mailing Address: _____

Email: _____
 Phone: _____

Date	Description	Hotel	Transport	Meals	Misc	Total
						\$ -
						\$ -
Total		\$ -	\$ -	\$ -	\$ -	\$ -

Attach receipts and CEU Certificate from the event.
 You must be appointed and serving in the Michigan Area of the UMC to receive the Grant. The Grant is a one time award of up to \$500.00.
 Your DS must recommend your attendance.

Email to: Marian@umfmichigan.org.

 Attendee Signature Date

 DS Signature Date