



## Rewards Redemption Request Form

Name:

Agency:

Address:

Telephone:

E-Mail:

I agree to abide by the policies and procedures of the Columbia Chapter NIGP Rewards Program. I have attached a copy of the class certificate, receipt of attendance, or registration paperwork as proof of my attendance.

If, for any reason, I must cancel my attendance prior to the event I have received funds for, I will return the Rewards to the Past President and may reuse my rewards for another event, as long as it falls within the calendar year in which it was awarded, and will submit a separate form for that function/event.

I used or will use my Columbia Chapter Rewards to attend the following Columbia Chapter/NIGP function/event:

Columbia Chapter

NIGP

Date(s):

Name of Event:

Location:

Cost: \$

Amount Requested: \$

Check made out to:

Mail to:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Submit completed form to the current Columbia Chapter Past President via email (check website for name and email address).

-----  
For Columbia Chapter use:

Approve by: \_\_\_\_\_

Date: \_\_\_\_\_

Amount: \$ \_\_\_\_\_