

APPLICATION FOR REIMBURSEMENT

NDT Pacific Region Training Fund

103 - 1658 Foster's Way, Delta, BC V3M 6S6 Phone · 604-526-0441 · 1-888-223-7711

Name: _____ Phone: _____

Address: _____ Union & Local #: _____

City/Postal Code: _____ ID #: _____

PLEASE ATTACH ORIGINAL RECEIPTS IN SAME ORDER AS LISTED BELOW

Date	Description of Expense	Course Fee	CGSB/Renewals	Misc	Approved

Applicant's _____ \$ \$ \$ \$

Signature: _____ **Subtotal** \$

Approved by: _____ **NDTMA Trustee**

FOR OFFICE	Adjustment	
USE ONLY	Total	\$

Approved by: _____ **QCC Trustee**

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Educational, certification and testing fees may not be claimed as a tax deductible expense if member receives reimbursement.