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**REQUEST FOR PAYMENT**

I am requesting payment for attendance at a Pyramid Model Module Training. I verify that I attended the training in full, signed the attendance sheet, and am authorized to request payment.

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Printed Name

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Signature Date

**Payment should be made to:**

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address/City/State/Zip

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Phone