

PRINT NAME

## CHINO BASIN WATERMASTER

## MONTHLY MEETING ATTENDANCE AND STIPEND CLAIM FORM

PLEASE COMPLETE AND RETURN THIS FORM TO WATERMASTER NO LATER THAN THE 7TH OF THE FOLLOWING MONTH. SEND THE COMPLETED FORM VIA FAX TO (909) 484-3890 OR VIA EMAIL TO ANNA TRUONG AT ATRUONG@CBWM.ORG. YEAR: MONTH: **REGULAR MONTHLY MEETINGS ATTENDED:** APPROPRIATIVE POOL NON-AGRICULTURAL POOL AGRICULTURAL POOL **ADVISORY COMMITTEE** RECHARGE INVESTIGATIONS AND PROJECTS COMMITTEE WATERMASTER BOARD OTHER MEETING(S)/EVENT(S) ATTENDED: (DATE) (MEETING) (DATE) (MEETING) (DATE) (MEETING) (DATE) (MEETING) (MEETING) (DATE) I, THE UNDERSIGNED, CONFIRM MY ATTENDANCE AT THE ABOVE MEETING(S): SIGNATURE DATE