



CHINO BASIN WATERMASTER

MONTHLY MEETING 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 NELSON AT ATRUONGNELSON@CBWM.ORG.

MONTH: _____ YEAR: _____

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)
_____	_____
(DATE)	(MEETING)

I, THE UNDERSIGNED, CONFIRM MY ATTENDANCE AT THE ABOVE MEETING(S):

SIGNATURE

DATE

PRINT NAME