William W. Winpisinger Education & Technology Center Attn: Baggage Reimbursement 24494 Placid Harbor Way Hollywood, MD 20636



Baggage Reimbursement Form

Before completing this form please determine whether or not your baggage fee is reimbursable.

Reimbursable	Any fee an airline charges for a participant's first checked bag.
Not reimbursable	Any fees for second or third checked bags. Any fees for bags checked by a guest(s) of a participant. Any fees for overweight baggage

To be Completed by Participant Only
Attach Original Receipts to this Form and Mail to the Address Above
This Form must be post marked within 30 days of the program ending date.

Card/Book Numl	ber				
Local Lodge _	District Lodge				
Class Name					
	Send Baggage Fe	ee Reimbursement (Circle	One): Local Lodge District Lodge		
Location of Lodg	ge or District				
	** <mark>Mandatory/Must sign form</mark> **				
(Signature)					
Baggage Fee re	eimbursement once	e submitted will be appro	oximately three weeks		
			·		
*****	*******	DO NOT WRITE BELC FOR OFFICE USE	OW THIS POINT************** CONLY		
REIMBURSEMENT		VERIFIED	SENT TO HQ		
98833-0350-5 U.S.	98831-0350-5 CANADIAN	METHOD	CALCULATIONS		
APPROVAL:		TOTAL	\$		