

**COMMUNITY RESOURCES MANAGEMENT-CLARK COUNTY**

**FY 2022-2023 Reimbursement Guidelines Training**

Letter of Attestation

I, \_\_\_\_\_ certify that I attended the FY 2022-2023 Reimbursement Guidelines Training on Wednesday, November 16, 2022. My signature below is a confirmation that I also understand the material presented and will comply with the direction provided by the Reimbursement Guidelines Training and thus will be evidenced by my invoice submissions. I also certify that I understand that it is my responsibility to provide a copy of this signed Attestation to my assigned Grants Coordinator.

\_\_\_\_\_

Signature

\_\_\_\_\_

Printed Name

\_\_\_\_\_

Agency Name

\_\_\_\_\_

Date