Morgan Horse Association of Oregon Open Incentive Program Reimbursement Form



Dear MHAO Member:

Thank you for participating in the MHAO Open Incentive Program. To receive a reimbursement of up to \$10 of your paid participation fees at an open to all breeds event (OTAB), please complete the form below and send it plus proof of payment to Karen Breckenridge, MHAO Treasurer. Maximum amount per year per membership is \$30.

Mail: MHAO Open Incentive C/O Karen Breckenridge, 4715 Eola Drive NW, Salem OR 97304

Email: wylieriley	@aol.com.				
If you have quest	tions, contact Sandi	i Humphfres, Op	en Incentive Chair at (541) 415-1230, <u>firemed13(</u>	@yahoo.co
Forms mus	t be received or pos	stmarked within	30 days of the event to b	e eligible for reimburse	ment.
p 1: Fill out the e	vent and your infor	rmation			
Event Name	· · · · · · · · · · · · · · · · · · ·				
Event Date(s):				
	nct Information: ddress, phone #, or ema	ail)			
MHAO Mem	nber Name				
MHAO Mem	nber Address*				
Morgan Hor	se Name				
	n Foor paid	\$			
Norgan Horse and	f of payment, <u>OR</u> as I paid the fees.	sk an Event Repr	esentative to sign below o		•
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MHAO USE ONLY					
Date received:		Reimbursed YTD:	\$		
Verified current member status:		Date received by Treasurer:			