

CERTIFICATION OF ATTENDANCE

2010 Introduction to Drug Prosecution

THIS FORM MUST BE FILLED OUT COMPLETELY AND ATTACHED TO YOUR REIMBURSEMENT FORM OR YOU WILL NOT BE REIMBURSED FOR YOUR EXPENSES.

(PLEASE PRINT)

I, _____ do hereby certify under criminal penalty for making false statement in violation of O.C.G.A. § 16-10-20, that the above statements are true and I have incurred the above expenses and authorized use of mileage in the discharge of my official duties.

I attended _____ hours at the 2010 Prosecuting Attorneys' Council of Georgia Introduction to Drug Prosecution

Signature _____ Date _____

Bar or POST Number: _____

MAXIMUM REIMBURSEMENT RATES:

Lunch \$7.00

Dinner \$15.00

Lodging \$89.00

Mileage \$0.50

This project was supported by Grant No. 2009-EF-S6-0033 awarded by the Office on Violence Against Women, U.S. Department of Justice. The opinions, findings, conclusions, and recommendations expressed in this publication/program/exhibition are those of the author(s) and do not reflect the views of the Department of Justice, Office on Violence Against Women.

