



## PRO-D FUNDS REQUEST

### Lunches Only 2024/25

NAME: \_\_\_\_\_ School: \_\_\_\_\_

ProD day lunch costs - please check off days you are applying for:

October 25, 2024 \_\_\_\_\_ X \$25  
November 8, 2024 \_\_\_\_\_ X \$25 *(If you signed up on the survey for self-directed)*  
February 14, 2025 \_\_\_\_\_ X \$25  
April 25, 2025 \_\_\_\_\_ X \$25  
May 16, 2025 \_\_\_\_\_ X \$25 *(If you signed up on the survey for self-directed)*  
  
Total \$ \_\_\_\_\_

- No receipts needed.
- Please do not claim if you have already been reimbursed or if your conference provided lunch.
- Submit completed form to the CTA Office: [pdchair@chiliwackteachers.com](mailto:pdchair@chiliwackteachers.com) by **June 13, 2025**.

#### Office Use Only:

ProD IF \$ \_\_\_\_\_ Approval # \_\_\_\_\_  
CARE \$ \_\_\_\_\_ **Total (Paid to Teacher) \$** \_\_\_\_\_  
Remedy \$ \_\_\_\_\_

CTA ProD Chair Signature \_\_\_\_\_