



Don Katz Memorial Fund Student Tuition Reimbursement

The Don Katz Memorial Fund was established by PAGD to encourage the participation of students and young dentists in PAGD events. To be considered for a gift from the Don Katz Memorial Fund please complete the following:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

For what PAGD event are you requesting reimbursement, including dates and location?

The expenses for the above event were incurred by me, and are not reimbursed through another source:

Signature

For PAGD Use

Signature of approving official: _____

Check completed by: _____

Amount reimbursed: _____