

# 2020 CT AFG Convention Reimbursement Request

Form must be received by May 26<sup>th</sup>

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First and Last Name *(Please print clearly)*

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Street Address

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City, State and Zip Code

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10 Digit Phone Number

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Email Address

I am requesting a refund for:

Convention Registration \_\_\_\_\_  
Number of Tickets Purchased \_\_\_\_\_

Saturday Banquet Buffet \_\_\_\_\_  
Number of Tickets Purchased for Red Lion @ \$40.00 \_\_\_\_\_  
Number of Tickets Purchased for Marriott @ \$35.00 \_\_\_\_\_

**Mail request to: CT AFG Convention, PO Box 635, Bristol, CT 06010**

***Please remember to include a self-addressed stamped envelope***

**Deadline for reimbursement: May 26th**

The 2020 CT AFG Convention Committee thanks you for your patience and support during this unusual and challenging time. If there are any questions, please contact us at the convention email: [convention2020@ctalanon.org](mailto:convention2020@ctalanon.org)