EDUCATION PROVIDER CLAIM FOR REIMBURSEMENT FROM DIVORCING PARENT EDUCATION AND MEDIATION FUND (T.C.A. § 36-6-413) FOR REDUCED FEE PARENTING EDUCATION

INSTRUCTIONS: Type and submit in duplicate to the Administrative Office of the Courts, Programs Manager, Divorcing Parent Education and Mediation Fund, 511 Union Street, Suite 600, Nashville, TN 37219.

STATE OF TENNESSEE
COUNTY OF: _____ COURT: _____ PART: _____

Cases for which a claim is being made:

Docket No.	Name of Parent	Date of Referral	Date of Service	Service Fee	Material Fee
			Totals:	**$**	**$**

NOTE: Attach copies of the original Orders to No Fee or Reduced Fee Education to this form. Give details of the parenting education services and material provided in the area provided on the back of this form.

I certify that the foregoing represents an accurate, complete statement of time in connection with parent education in the above action or proceedings.

_____
Signature of Education Provider **Date**

Enter FULL Name, Address, and Phone Number

Provider: _____

Address: _____

_____

City: _____ State: _____ Zip: _____

Phone: (__ _) ____ - __ __ Email:_____

TO BE COMPLETED BY THE ADMINISTRATIVE OFFICE OF THE COURTS

Total authorized payment ..... $_____

Date of Service	Name of Parent	Services Provided	Materials Provided