

## Payment Details

Training Sponsor  
1512 Main St.  
Chicago, CA 60007

**Date:** 07/01/2023

**Check Number:** 123

**Pay to:** Johnson, Lori 6381  
1514 Red Bird Place  
Dublin, CA 94566

**Amount:** \$434.65

**Itemized Detail:**

06/28/2023	Federal Claim - June 2023	\$413.91
06/28/2023	State Claim - June 2023	\$20.74

**Multiple Month Claim Details:**

	<u>Tier 1</u>	<u>Tier 2</u>
Breakfast	64	\$115.72
AM Snack		\$0.00
Lunch	76	\$242.30
PM Snack	79	\$76.63
Dinner		\$0.00
Evening Snack:		\$0.00
<b>Total</b>	<b>\$434.65</b>	<b>\$0.00</b>

**Check Summary:**

	<u>This Check</u>	<u>Year to Date</u>
Total Claim Payout:	\$434.65	\$718.43
Own Child Claim Payments:	\$0.00	\$0.00
Total Non Claim Payments/Withdrawals:	\$0.00	