

Medical Technology Internship Matching Program of Michigan (MTIMPM)

**Hospital-based Clinical Practicum Program**

**BILLING STATEMENT**

Return the billing statement with appropriate fee by **November 1st**

Participation Fee =	\$40.00
Hospital-based Clinical Practicum Program Name:	

Return with check or money order payable to: **MTIMPM (Federal Tax ID: 26-3517558)**  
**1140 Abbott Rd. #4054**  
**East Lansing, MI 48826**