

AAPT/PTRA VENDOR REPORT FORM

When PTRA leaders use equipment from our supporting vendors we earn funds to support future AAPT/PTRA efforts.

Title of Workshop:	Date(s):	
Location of Workshop: City, State, and/or S	Total Time for Worksh	op (in hours):
Total Number of Participants = []	Location of Workshop:	
1. If you have used equipment from below and complete this AAPT/PTF	one of our supporting ven	
This workshop used equipment from	m □PASCO □TI □	Vernier ☐ Other
2. Below list number and/or title of endame and catalog number of the equation		•
Number(s) AAPT/PTRA Activities	Name of Equipment Used	Catalog Number
Name and E-mail address of P	TRA completing this form:	

AAPT/PTRA - Void after August 1, 2011

This form is available on AAPT/PTRA web site.

¹ If more than one vendor's equipment was used, please provide separate AAPT/PTRA Vendor Report Form for each vendor.

If vendor catalog number is not available or the name of the equipment is unique, leave this column blank, but be sure to make the name of the equipment used very clearly stated and unique.