

**Facility Usage Fee Form**

*(Return to: IEM 1166 Broadway Ste. Q, Placerville, CA 95667)*

Name of Facility Vendor \_\_\_\_\_

School: \_\_\_\_\_

List all students in the class:

<u>IEM STUDENTS</u>	<u>STUDENT #</u>	<u>NON-IEM STUDENTS</u>
1. _____		1. _____
2. _____		2. _____
3. _____		3. _____
4. _____		4. _____
5. _____		5. _____
6. _____		6. _____
7. _____		7. _____
8. _____		8. _____
9. _____		9. _____
10. _____		10. _____

**Total IEM =** \_\_\_\_\_

**Total Non-IEM=** \_\_\_\_\_

IEM student percentage \_\_\_\_\_

Total Facility Fee \_\_\_\_\_

IEM Facility Cost \_\_\_\_\_