



# NAPLA

NORTHEAST ASSOCIATION OF PRE-LAW ADVISORS, INC.

## TRAVEL AND EXPENSE REIMBURSEMENT FORM

ATTACH ALL ORIGINAL RECEIPTS TO THIS FORM AND SUBMIT WITHIN 60 DAYS VIA EMAIL TO [jaya@scholtescpa.com](mailto:jaya@scholtescpa.com) AND CC [dm047@bucknell.edu](mailto:dm047@bucknell.edu) and [mvitlip@fandm.edu](mailto:mvitlip@fandm.edu)

NAME: \_\_\_\_\_

DATES/PURPOSE OF TRAVEL: \_\_\_\_\_

HOME ADDRESS (INCLUDE ZIP): \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ — \_\_\_\_\_ EMAIL: \_\_\_\_\_

<b>TRAVEL EXPENSES</b>	<b>ITEMIZE</b>	<b>SUBTOTALS</b>
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<b>TRANSPORTATION</b> <i>(specify: air/train/bus/taxi)</i>		
<b>MILEAGE</b> <i>(# of miles x .545¢ per mile)</i>		
<b>PARKING</b>		
<b>TOLLS</b>		
<b>FOOD</b>		
<b>LODGING</b>		
<b>OTHER</b> <i>(please specify)</i>		
	<b>TOTAL REIMBURSEMENT REQUESTED</b>	<b>\$</b>

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_