



THE AMERICAN LAW INSTITUTE

Expense Reimbursement Form

Return with receipts to Lindsay F. Goch

EMAIL: LGOCH@ALI.ORG | PHONE: 215-243-1675 | FAX: 215-243-1636

MAIL: 4025 CHESTNUT STREET PHILADELPHIA, PA 19104-3099

Meeting/Event: _____

Expenditures for dates (inclusive): _____ to _____, 2016

DATE (MO/DAY)					SUBTOTAL
Transportation					
Air*					
Rail*					
Ground/Taxi					
Mileage (\$0.575 cents/mile)					
Lodging					
Hotel room/tax					
Meals					
Breakfast					
Lunch					
Dinner					
Other Expenses (specify):					
TOTAL EXPENSES					
<i>(Less any contribution or advance)</i>					
REIMBURSEMENT REQUESTED					

Please check if you are a federal, state, or local "government official" as defined in 26 USC § 4946. ALI is required to report payment of certain travel and entertainment expenses on its IRS Form 990.

Name: _____ Date: _____

Mailing address for check: _____

* Absent unusual circumstances, ALI will reimburse only discounted, non-refundable coach airfares and non-Acela coach Amtrak fares.

Please note:

- a) Please attach receipts for **all** expenses for which you are requesting reimbursement.
- b) Please complete and return this form **immediately** following the conclusion of travel. **Expenses submitted six months after the date of the meeting may not be eligible for reimbursement.**
- c) If expenses were incurred for others, please indicate: type of expense, date, place, amount, purpose, and names and relationship to the Institute of other persons. Expenses for spouses are not reimbursable.
- d) For those outside the U.S. who would prefer a wire transfer please type the requested information below:
1/ Payee Name, 2/ Bank Name, 3/ Branch Name & Address, 4/ Swift or BIC Code, 5/ Account Number, 6/ IBAN, 7/ International Routing Code (only needed for certain EU countries): _____

Do not write in box; for ALI use only.

Approval by ALI _____

Account code #: _____