

## Arbitrator Expense Report

FIIIIdĸ		All Amounts Entered in US Dollars					Budgeting purpose only (FINRA staff use only)							
		Arbitrator Name		Arb. ID:			Dept Name Dept #				T&E #	0 0		
		Mailing Address					Location Pro			roj / Life Cycle:			Overall Business Purpo	se:
City, State, Postal Code							* See below for Multiple				tiple Distributions			
Date		Transportation		Mileage			Lodging Meals			Telephone Expense		Misc.	Total	
	Airfare / Rail	Car Rental	Taxi/Metro Local Trans/Parking/Tolls	Rate	Miles Driven	Mileage Expense	Room & Tax Only	Breakfast	Lunch	Dinner			Expense	
				0.575		-								-
				0.575		-								-
				0.575		-								-
				0.575		-								-
Sub-Total		_	_	0.575	_		-	_						-
Total	-	_	-		I	-	-	-	-	-	-		-	-
GL Code	6500010	6500020	6500030			6500040	6500050	6500111	Total Meals	-	6500060		6500080	
		*		EXPLANA	TION OF MEA	LS & MISCELLANEOUS EX					-			
DATE	PLACE		BUSINESS PURPOSE							AMOUNT				
													DUE ARBITRATOR:	-
													Arbitrator Checklist	
													State specific business	purpose
												Attach documentation of prior approval if necessary. Send original with receipts for		
	<u> </u>													
												expenses of \$25 and ab FINRA Dispute Resolu	ove to:	
* Use this section to charge multiple Departments, Locations, Projects and Life Cycle (FINRA staff use only)														
AMOUNT	ACCOUNT #	DEPT. #	LOCATION	PROJECT	LIFE CYCLE		certify that th	ne above info	ormation is co	omplete and tr	rue and in compliance	e with F	INRA policy	
						Arbitrator Signature:							Date:	
						Approver's Name:								
						Approved by:							Date:	

\*\*\*SEE INSTRUCTIONS TO COMPLETE THIS FORM\*\*\*