



# EXPENSE REPORT

Your Name: \_\_\_\_\_

Report Date: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Event Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Event Purpose: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City/State/Zip: \_\_\_\_\_

\_\_\_\_\_

Nature of Expense if not for Meeting or Function: \_\_\_\_\_

**Expense Classification**

**Amount to Individual**

**Amount to Firm**

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**TOTAL:**

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\_\_\_\_\_

*If claiming travel by private car please attach the map with the miles from the start address to the destination address.*

Attach all receipts and send form to [accounting@iltanet.org](mailto:accounting@iltanet.org). Please keep a copy for your records.

By signing this document, I have read and understand the ILTA Volunteer Expense Reimbursement Policy.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date Signed



# EXPENSE REPORT

## Banking Information:

Payments will be processed by ACH/EFT (Wire if outside of US). Please provide your banking details to ensure prompt reimbursement. It is company policy to confirm your banking details, therefore please expect a call from our accounting office.

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Name on Account: \_\_\_\_\_

ACH Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Your Address: \_\_\_\_\_

Your Cell Number: \_\_\_\_\_

**If outside of the US, please also fill out the below.**

IBAN: \_\_\_\_\_

SWIFT/BIC Code: \_\_\_\_\_

Sort Code: \_\_\_\_\_

Transit Code (if in Canada): \_\_\_\_\_

Please verify that the above information is correct before submitting the form to ensure proper reimbursement. Thank you!