



ALUMNI LEADERSHIP CONFERENCE

day10 Executive Committee Reimbursement Form

Please submit original receipts for your travel expenses for ALC and allow 3 weeks for your reimbursement. Reimbursement for ALC must be received by December 31, 2015.

Name _____

Date: _____

Mailing Address _____

Phone (Day) _____

Description of Expenses

Airfare \$ _____

Rental Car \$ _____

Gas \$ _____

Other _____ \$ _____

Total \$ _____

Travel reimbursement is as follows:

Actual gas expenses or airfare or a combination of air/car rental up to \$500 is covered by the Alumni Association.

Please submit **actual** receipts for reimbursement.
(Copies of receipts are not accepted for reimbursement)

Reimbursements will be processed after ALC.

Please retain my reimbursement and apply it to the **Alumni Association Legacy Scholarship** in the amount of \$ _____.

Signature _____ Date _____

Please mail, with receipts to:

University of Dayton
Alumni Relations
Attn: ALC Reimbursement – day10
300 College Park
Dayton, OH 45469-7052