



**DEPARTMENT OF NETWORK ADVANCEMENT  
2017 STUDENT CONVENTION REIMBURSEMENT REQUEST FORM**

**Instructions:**

- Please read and complete this form completely.
- You must submit your reimbursement requests no later than **May 4, 2017**.
- Attach **copies** of your receipts.
- Submit your materials via email to: [accountspayable@acslaw.org](mailto:accountspayable@acslaw.org)

I am a (check all that apply):             Student Transportation Scholarship Recipient  
    Next Generation Leader

I am requesting a reimbursement for the following expenses associated with my transportation to the 2017 ACS Student Convention. I have attached appropriate receipts totaling up to my pre-approved amount of \$ \_\_\_\_\_

**Travel scholarship award amount**

If your flight was cancelled, please describe the steps taken to obtain a travel refund:

\_\_\_\_\_

\_\_\_\_\_

TRANSPORTATION	AMOUNT REQUESTED	CHECK DETAILS
Flight from (city): _____		Check should be made out to (name): _____
Bus or Train from (city): _____		
Drive from (city): _____ Names of your passengers: 1. _____ 2. _____ 3. _____  <i>Please attach a Google map of the driving distance with this form.</i> Total number of miles driven round trip: _____	Mileage reimbursements are calculated based on # of car passengers and the federal govt. mileage rate of 53.5 cents/mile.	Check should be sent to (mailing address): _____
<b>TOTAL</b>		

I certify that I was awarded these expenditures by the ACS National Office and that expenses are for ACS-related activities only. I also certify that I did not receive a refund for flight costs.

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

Signature (E-Signatures are fine) \_\_\_\_\_

Email address \_\_\_\_\_

Phone \_\_\_\_\_

Law School (if student) \_\_\_\_\_

INTERNAL ACS NOTES:

Date Received: \_\_\_\_\_ Date Submitted for Processing: \_\_\_\_\_

Staff Approval: \_\_\_\_\_