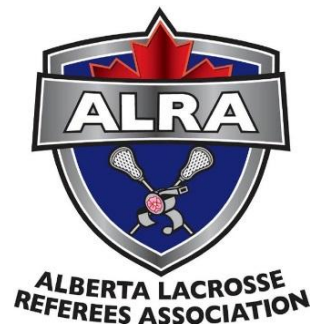


ALRA EXPENSE REPORT



Referee Name: _____

Email Address: _____

Date	Expense Type	Amount (\$)	Distance (km)	Driver/Rider	Amount (\$)	Per Diem	Total
<i>Please fill in the form as demonstrated above</i>							

Total Due: \$ _____

Expense Form Guidelines:

- 1) Mileage shall be in accordance with ALA Policy. Rider rate of \$0.10/km shall apply, pending RIC approval
- 2) Expenses and per diems are subject to RIC approval
- 3) Please total your expense form before submission, or your expense form will be returned to you for completion
- 4) Submit all completed expense forms to your league RIC, via email attachment

Note: If printing, ensure your printer page set up is adjusted to print in landscape mode