Birmingham Holocaust Education Committee
Expense Documentation Form

Today's Date_____

Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

Conference:		
Date of Conference:		
Tuition Expense:		$ *Pre-paid by BHEC*
Transportation:		
Automobile mileage	# of miles _____ X $.48/mile =	$
Airfare (Ticket)		$
Ground (shuttles, taxis)		$
Lodging:	# nights _____ X cost/night _____ =	$
Meals:		$
	Total Cost to be Reimbursed	$

Expense reports must be submitted within two (2) weeks of event and must include receipts for reimbursement. Reimbursement checks will be mailed to the address listed above.

Please return completed form with receipts to:

Birmingham Holocaust Education Committee
P.O. Box 130805
Birmingham, AL 35213-0805

?? Questions??
Email: *Scholarship@bhamholocausteducation.org*