



Arbitrator Expense Report

All Amounts Entered in US Dollars

Budgeting purpose only (FINRA staff use only)

Arbitrator Name	Arb. ID:	Dept Name	Dept #	T&E #	0 0
Mailing Address		Location	Proj / Life Cycle:	Overall Business Purpose:	
City, State, Postal Code		* See below for Multiple Distributions			

Date	Transportation			Mileage			Lodging	Meals			Telephone Expense	Misc. Expense	Total
	Airfare / Rail	Car Rental	Taxi/Metro Local Trans/Parking/Tolls	Rate	Miles Driven	Mileage Expense	Room & Tax Only	Breakfast	Lunch	Dinner			
				0.575		-							-
				0.575		-							-
				0.575		-							-
				0.575		-							-
				0.575		-							-
Sub-Total	-	-	-		-	-	-	-	-	-	-	-	-
Total	-	-	-			-	-	-	-	-	-	-	-
GL Code	6500010	6500020	6500030			6500040	6500050	6500111	Total Meals	-	6500060	6500080	

EXPLANATION OF MEALS & MISCELLANEOUS EXPENSES

DATE	PLACE	BUSINESS PURPOSE	AMOUNT

DUE ARBITRATOR: -

Arbitrator Checklist

State specific business purpose

Attach documentation of prior approval if necessary.

Send original with receipts for expenses of \$25 and above to: FINRA Dispute Resolution

* Use this section to charge multiple Departments, Locations, Projects and Life Cycle (FINRA staff use only)

AMOUNT	ACCOUNT #	DEPT. #	LOCATION	PROJECT	LIFE CYCLE	I certify that the above information is complete and true and in compliance with FINRA policy				
						Arbitrator Signature:			Date:	
						Approver's Name:				
						Approved by:			Date:	

SEE INSTRUCTIONS TO COMPLETE THIS FORM