



Reimbursement Claim for Travel Expenses

32nd Symposium on the Interface: Computing Science and Statistics
April 5-8, 2000
New Orleans, Louisiana

Expenses

Registration _____

Hotel (Housing) and Meals _____

Transportation _____

Total Requested _____

Please attach all receipts and note that the total requested reimbursement is limited to that offered by prior agreement. Original receipts are required. Original stubs from airline tickets are required. No reimbursements will be made based on photocopies of receipts or travel agency billings. No reimbursements will be made if receipts are not available.

Complete this form and mail it to:

Dr. Sally Morton
RAND
1700 Main Street
P.O. Box 2138
Santa Monica, California 90407-2138

I certify that all expenses were incurred by me in connection with my participation in the Interface Symposium, and are reasonable and accurate.

Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

U.S. Social Security Number _____

Signature _____

Approval by Program Chair _____ Approval by IFNA Headquarters _____
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