

# United States Police Canine Association, Inc.

## Chief Judge Reimbursement Form

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

(Address, City St & Zip, or PO Box where you want the check mailed)

Email: \_\_\_\_\_ Todays Date \_\_\_\_\_

Date of Trials: \_\_\_\_\_ Location of Trials: \_\_\_\_\_

### Travel Information:

The USPCA National Office will reimburse your travel expenses (air/rail/bus – economy/standard, car rental) - up to \$600 total with receipts required. Mileage rate is .54 per mile. All receipts may be emailed to [uspcanationaltreasurer@gmail.com](mailto:uspcanationaltreasurer@gmail.com) or mailed to:

USPCA  
Wayne Rothschild  
6 Putnam Court  
Commack, NY 11725

**TRAVEL EXPENSES =** \_\_\_\_\_

**OTHER EXPENSES =** \_\_\_\_\_

**TOTAL REQUEST FOR REIMBURSEMENT =** \_\_\_\_\_