

Delaware Agriculture Week Speaker Statement of Expenses

Please complete and return by February 15, 2010 to:

Emmalea Ernest
University of Delaware
16483 County Seat Hwy.
Georgetown, DE 19947
Email: emmalea@udel.edu
Phone: 302-856-7303; Fax: 302-856-1845

Speaker Name: _____

Address: _____

Phone: _____ Cell: _____

Email Address: _____

SSN# or EIN: _____

Sessions in which you participated _____

Expenses: Air fare (attach original receipt) \$ _____

Taxi, Parking, etc. \$ _____

Mileage: _____ miles @ \$0.55/mile = \$ _____

Hotel charges (attach original receipt) \$ _____

Meals (attach original receipts) \$ _____

Other Expenses (attach original receipts) \$ _____

Please describe _____

Honorarium \$ _____

Total Expenses \$ _____

Make check payable to: _____

Send check to this address (if different from above)

Signature _____ Date _____