

## Trustee Nominating Committee

Office of the Assemblies 109 Day Hall Ithaca, NY 14853 trustee-elections@cornell.edu

## **Employee-Elected Trustee Election**

Spring 2018 Candidate Expense Form

Candidate Name:	NetID:
Local Mailing Address	
Please summarize your campaign expenditures below and attach receipts for all expenses. This fo	is due to the Office of the Assemblies
(109 Day Hall) by <b>2:00pm on Thursday, June 7, 2018</b> . All candidates must submit an expense re	
money on the campaign. By not submitting an expense report, a candidate is risking disqualificati	
option during registration, we will process your reimbursement based on the information provide	
Expense	Amount
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
Т	Total:
I certify that the above information that I have provided is true, accurate, and without om of this form may result in my disqualification from the election and/or referral to the Judi	
Candidate Signature	Date