EXPENSE REPORT EXAMPLES

The following pages contain four applicant reimbursement examples. Each applicant's specific reimbursement requirements and circumstances are provided, accompanied by a corresponding expense report reflecting this information. Following the fourth sample report, images of itemized receipts are included as examples of the appropriate format and content for submission.

Applicant A

- ***Reimbursement Eligibility:*** **Did not elect waiver/not eligible for waiver**
  Nonrefundable travel and lodging expenses, meals, change fees, and other reasonable expenses determined to be bar-exam related.
- **Travel Mode(s):** Personal vehicle
- ***Dates of Travel:***
  - ***Arrival in Yakima, WA:*** afternoon on Monday, July 27, 2026
  - ***Departure from Yakima, WA****:* afternoon on Wednesday, July 29, 2026
- Original lodging was booked for 2 nights, beginning on July 27, 2026, and Applicant extended their original stay by one night in anticipation of needing to extend the test to a third day. The third night was nonrefundable.

EXPENSE REPORT CATEGORIES:

- **Transportation:** ***Auto Mileage***
  - Applicant drove from their home in Seattle, WA to the Holiday Inn in Yakima, WA on Monday, July 27, 2026 with a return trip via the same route on Wednesday, July 29, 2026.

- **Meals:** ***(all amounts inclusive of tax and tip)***
  - Applicant arrived in Yakima, WA the afternoon of Monday, July 27, 2026, and incurred dinner expenses of $35.
  - On Tuesday, July 28, 2026, Applicant incurred meal expenses for breakfast ($20), lunch ($25), and dinner ($35).
  - On Wednesday, July 29, Applicant incurred meal expenses for breakfast ($20) and lunch ($25).

- **Lodging:** ***(all amounts inclusive of taxes and fees)***
  - Applicant stayed a total of 2 nights (July 27-28, 2026) at cost of $155 per night.
  - Applicant booked a nonrefundable stay for the third night (July 29, 2026) at a cost of $170.

WASHINGTON STATE
BAR ASSOCIATION

JULY нлн6 BAR EXAM 9·t9b{9 w9thw¢

(Effective August 2026)

See second page for WSBA Expense Policy summary. Please fill out completely and legibly. Reimbursement checks will be payable *only* to the person incurring the expense, as documented by itemized receipts. If you incurred childcare expenses, please complete Reimbursement of Childcare for WA July 2026 Bar Exam. **Please email one PDF of this form and itemized receipts to 2026BarExamExpenses@wsba.org.**

Signed expense reports must be submitted by October 15, 2026

Make Check Payable to (Please print name):
Applicant A

{űŊŜŜű !ŘŘŊŜăăΣ ʎyŎfdzŘʎyƎ /ʎűèΣ {űl·űŜΣ ½ʎǈ (Mail check to this address):
1325 4th Avenue, Seattle, WA 98101

9πΥl·ʎf: applicantA@test.org

Applicant IY 12345

tKƨyŜY (123) 456-7891

PLEASE SELECT ONE
(terms of eligibility on page 3)

Elected the waiver

X Did not elect waiver OR not eligible for waiver

By my handwritten or typed signature below, I certify that: (1) these expenses comply with the WSBA Expense Policy with the exception of the reimbursement for out-of-state travel as specifically allowable by the Board of Governors as part of the July 2026 exam reimbursement; (2) I am the person entitled to receive reimbursement for these expenses; (3) these expenses have not been reimbursed by any other source; (4) I am not seeking reimbursement for alcohol unless permitted by WSBA Fiscal Policy; (5) the information provided within this form is accurate and true. By accepting the travel reimbursement from the Washington State Bar Association (WSBA), the recipient releases and discharges any and all claims against WSBA, its officers, employees, agents, and volunteers arising out of or in connection with the travel, lodging, and with expenses related to the July 2026 bar exam reimbursed by the WSBA.

X: *Applicant A* Date: 08/14/2026

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		07/27/2026	07/28/2026	07/29/2026			/ I·űŜƷ2Ŋè ¢2űl·fă
	9ÈǈŜyãŜ 5I·űŜY	07/27/2026	07/28/2026	07/29/2026			
	9ØŜyű 5I·űŜY	July 28 - July 30, 2026					
	9ØŜyű bI·ΥŜY	Washington July 2026 Bar Exam					
	¢ŊI·ØŜf [ƨŎl·űʎƨyόăú CŊƨΥκ¢ƨ ό! ŘŘŊŜăăúY *ƑLŦ yŜŜŘŜŘΣ dzăŜ ăǈl·ŎŜ ōŜfƨό űƨ ǈŊƨØʎŘŜ I·ŘŘŊŜăă ʎyƬƨŊΥI·űʎƨyφ*	Home to Hotel (see addresses provided below)		Hotel to Home (see addresses provided below)			
¢ŊI·yăǈƨŊűI·űʎƨy	Auto Mileage	143.60 miles	miles	143.60 miles	miles	miles	287.20
	Total ($ 0.76/mi)	$109.14		$109.14			$218.28
	Ground Transportation, Parking, Tolls						
	Airfare (coach/economy only)						
a ŜI·fă	Breakfast (up to $23) *		$20.00	$20.00			$40.00
	Lunch (up to $26) *		$25.00	$25.00			$50.00
	Dinner (up to $38) *	$35.00	$35.00				$70.00
[ƨŘƎʎyƎ (up to $200/night; $225/ night in Seattle; + tax and fees) *		$155.00	$155.00	$170.00			$480.00
hűKŜŊ 9ÈǈŜyãŜă (itemize):							
¢ƨűl·fă		$299.14	$235.00	$324.14			$858.28

Ƒ5ƨffI·Ŋ I·ΥƨdzyűăyƨűŜŘƨy űKʎă 9ÈǈŜyãŜ wŜǈƨŊű ŦƨŊ ΥŜI·fă I·yŘ fƨŘƎʎyƎ I·ŊŜ ŎƨyăʎŘŜŊŜŘ ŊŜl·ăƨyl·ōfŜ ǈŜŊ ²{.! ŦʎăŎl·f ǈƨfʎŎèφ wŜǇdzŜăűă ŦƨŊ ŊŜʎΥōdzŊăŜΥŜyűă ŜÈŎŜŜŘʎyƎ űKŜ ăűl·űŜŘ I·Υƨdzyűă ΥI·è ōŜ ădzōΥʎűűŜŘΣ KƨόŜØŜŊ ŜÈǈŜyãŜă ăKƨdzfŘ ōŜ ŊŜl·ăƨyl·ōfŜ I·yŘ ǈŊdzŘŜyű ƎʎØŜy űKŜ ŎʎŊŎdzΥăűl·yŎŜă I·yŘ όʎff ōŜ ădzōǿŜŎű űƨ ²{.!Ǵă ʎyűŜŊyl·f ŊŜØʎŜό ǈŊƨŎŜăăφ

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5I·űŜ	**CŊƨΥ**	**¢ƨ**
07/27/2026	1325 4th Avenue, Seattle, WA 98101	802 E Yakima Ave, Yakima, WA 98901 (Holiday Inn)
07/29/2026	802 E Yakima Ave, Yakima, WA 98901 (Holiday Inn)	1325 4th Avenue, Seattle, WA 98101

Applicant B

- ***Reimbursement Eligibility:*** **Elected the waiver**
  Nonrefundable exam-related costs incurred in anticipation of needing to extend the test to a third day on July 30, 2026.
- **Travel Mode(s):** Air
- ***Dates of Travel:***
  - ***Arrival in Yakima, WA:*** afternoon on Monday, July 27, 2026
  - ***Departure from Yakima, WA****:* morning on Wednesday, July 29, 2026
- Applicant extended their original stay by one night on Wednesday, July 29, 2026, in anticipation of needing to extend the test to a third day. The third night was nonrefundable.
- Applicant's original flight to return home was scheduled for Thursday, July 30, and was subsequently changed to the morning of Wednesday, July 29, 2026.

EXPENSE REPORT CATEGORIES:

- **Lodging:** ***(including taxes and fees)***
  - Applicant booked an additional night at the hotel on Wednesday, July 29, 2026, that was nonrefundable at cost of $170.

- **Other Expenses:** ***Airfare change costs***
  - Applicant incurred expenses of $250 on July 28, 2026 to change their flight due to the cancellation of the exam. Change costs are inclusive of change fees and the difference in flight fares.

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(Effective August 2026)

See second page for WSBA Expense Policy summary. Please fill out completely and legibly. Reimbursement checks will be payable *only* to the person incurring the expense, as documented by itemized receipts. If you incurred childcare expenses, please complete Reimbursement of Childcare for WA July 2026 Bar Exam. **Please email one PDF of this form and itemized receipts to 2026BarExamExpenses@wsba.org.**

Signed expense reports must be submitted by October 15, 2026

Make Check Payable to (Please print name): Applicant B			**PLEASE SELECT ONE** *(terms of eligibility on page 3)*
{ǘǁŜŜǘ !ŘŘǊŜǎǎ ΛŷƻƳŜΛȅ /ƛǘȅΣ {ǘŀǘŜΣ ½LJ (Mail check to this address): 1325 4th Avenue, Seattle, WA 98101			X **Elected the waiver**
9ƳŀƛƭΥ applicantB@test.org	Applicant LŘ 23456	tƘƻƴŜ (234) 567-8910	**Did not elect waiver OR not eligible for waiver**

By my handwritten or typed signature below, I certify that: (1) these expenses comply with the WSBA Expense Policy with the exception of the reimbursement for out-of-state travel as specifically allowable by the Board of Governors as part of the July 2026 exam reimbursement; (2) I am the person entitled to receive reimbursement for these expenses; (3) these expenses have not been reimbursed by any other source; (4) I am not seeking reimbursement for alcohol unless permitted by WSBA Fiscal Policy; (5) the information provided within this form is accurate and true. By accepting the travel reimbursement from the Washington State Bar Association (WSBA), the recipient releases and discharges any and all claims against WSBA, its officers, employees, agents, and volunteers arising out of or in connection with the travel, lodging, and with expenses related to the July 2026 bar exam reimbursed by the WSBA.

X: *Applicant B* Date: 08/14/2026

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		07/28/2026	07/29/2026				/ŀǘŜƎƻǊȅ ¢ƻǘŀƭǎ
9ȄǇŜƴǎŜ 5ŀǘŜ		07/28/2026	07/29/2026				
9ǾŜƴǘ 5ŀǘŜ		July 28 - July 30, 2026					
9ǾŜƴǘ bŀƳŜ		Washington July 2026 Bar Exam					
¢ǊŀǾŜƭ [ƻŎŀǘƛƻƴǎ CǊƻƳ/¢ƻ ό!ŘŘǊŜǎǎύ Ƴŀȅ ōŜ ǊŜǉǳƛǊŜŘ ǘƻ ǾŜǊƛŦȅ ƳƛƭŀƎŜ ŘƛǎǘŀƴŎŜ							
¢ǊŀƴǎǇƻǊǘŀǘƛƻƴ	Auto Mileage	miles	miles	miles	miles	miles	
	Total ($ 0.76/mi)						
	Ground Transportation, Parking, Tolls						
	Airfare (coach/economy only)						
aŜŀƭǎ	Breakfast (up to $23) *						
	Lunch (up to $26) *						
	Dinner (up to $38) *						
[ƻŘƎƛƴƎ (up to $200/night; $225/ night in Seattle; + tax and fees) *			$170.00				$170.00
hǘƘŜǊ 9ȄǇŜƴǎŜǎ (itemize): Airfare change costs		$250.00					$250.00
¢ƻǘŀƭǎ		$250.00	$170.00				$420.00

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LŦ ȅƻǳǊ ŜȄǇŜƴǎŜ ǊŜƛƳōǳǊǎŜƳŜƴǘ ƛƴŎƭǳŘŜǎ ƳŜŀƭǎ ŦƻǊ ƻǘƘŜǊǎΣ ƭƛǎǘ ǘƘŜƛǊ ƴŀƳŜǎ ŀƴŘ ǘƘŜ ōǳǎƛƴŜǎǎ ǇǳǊǇƻǎŜ ƻŦ ǘƘŜ ƳŜŀƭΦ

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Applicant C

- ***Reimbursement Eligibility:*** **Did not elect waiver/not eligible for waiver**
  Nonrefundable travel and lodging expenses, meals, change fees, and other reasonable expenses determined to be bar-exam related.
- **Travel Mode(s):** Air, rideshare
- ***Dates of Travel:***
  - ***Arrival in Yakima, WA:*** afternoon on Monday, July 27, 2026
  - ***Departure from Yakima, WA****:* morning on Wednesday, July 29, 2026
- Applicant was charged for three nights of hotel but left after two nights. The third night was nonrefundable.
- Applicant traveled from out-of-state to attend the exam.

EXPENSE REPORT CATEGORIES:

- **Transportation:**

  Ground Transportation (including taxes, fees, and tip)
  - Applicant used a rideshare vendor for transport between home and the airport. The cost incurred was $65 on Monday, July 27, 2026 and $65 on Wednesday, July 29, 2026.
  - Applicant used a rideshare vendor for transport between the airport and the hotel in Yakima. The cost incurred was $25 on Monday, July 27, 2026 and $25 on Wednesday, July 29, 2026.

  Airfare
  - Applicant booked a nonrefundable round-trip ticket leaving on Monday, July 27, 2026 from San Diego, CA to Yakima, WA and returning on Thursday, July 30, 2026. Total cost paid for flight was $575.

- **Meals**
  - Applicant arrived in Yakima, WA the afternoon of Monday, July 27, 2026 and incurred meal expenses for lunch ($25) and dinner ($35).
  - On Tuesday, July 28, 2026 Applicant incurred meal expenses for breakfast ($20), lunch ($25), and dinner ($35).
  - On Wednesday, July 29, 2026 Applicant incurred meal expenses for breakfast ($20).

- **Lodging:** ***(including taxes and fees)***
  - Applicant paid for a total of 3 nights (July 27-29, 2026) at cost of $155 per night.

- Applicant left the morning of Wednesday, July 29, 2026 and did not stay a third night.

- **<u>Other Expenses:</u>**

  Baggage fees

  - Applicant incurred baggage fees of $35 per flight ($70 total).

  Airfare change costs

  - Applicant incurred expenses of $250 to change their flight due to the cancellation of the exam on July 28, 2026. Flight change costs inclusive of change fees and the difference in flight fare.

WASHINGTON STATE BAR ASSOCIATION

JULY нлн6 BAR EXAM 9·t9b{9 w9thw¢

(Effective August 2026)

See second page for WSBA Expense Policy summary. Please fill out completely and legibly. Reimbursement checks will be payable *only* to the person incurring the expense, as documented by itemized receipts. If you incurred childcare expenses, please complete Reimbursement of Childcare for WA July 2026 Bar Exam. **Please email one PDF of this form and itemized receipts to 2026BarExamExpenses@wsba.org.**

Signed expense reports must be submitted by October 15, 2026

Make Check Payable to (Please print name): Applicant C	**PLEASE SELECT ONE** *(terms of eligibility on page 3)*
{ůŋŜŜů !ŘŘŋŜăă ʎŶůdzŘʎy∃ /ŭèΣ {ůl·ůŜΣ ½ǂ) (Mail check to this address): 1325 4th Avenue, Seattle, WA 98101	Elected the waiver
9πYl·ʎť: applicantC@test.org — Applicant IY: 34567 — tK2yŜY: (345) 678-9101	X Did not elect waiver OR not eligible for waiver

By my handwritten or typed signature below, I certify that: (1) these expenses comply with the WSBA Expense Policy with the exception of the reimbursement for out-of-state travel as specifically allowable by the Board of Governors as part of the July 2026 exam reimbursement; (2) I am the person entitled to receive reimbursement for these expenses; (3) these expenses have not been reimbursed by any other source; (4) I am not seeking reimbursement for alcohol unless permitted by WSBA Fiscal Policy; (5) the information provided within this form is accurate and true. By accepting the travel reimbursement from the Washington State Bar Association (WSBA), the recipient releases and discharges any and all claims against WSBA, its officers, employees, agents, and volunteers arising out of or in connection with the travel, lodging, and with expenses related to the July 2026 bar exam reimbursed by the WSBA.

X: *Applicant C* Date: 08/14/2026

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9ȄLJŜyăŜ 5l·ůŜY	07/27/2026	07/28/2026	07/29/2026			/l·ůŜ∃2ŋè ¢2ůl·fă
9ǿŜyů 5l·ůŜY	July 28 - July 30, 2026					
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¢ŋl·ǿŜf [2Ŏl·ůʎ2yǿă CŋŋY K¢2 ó!ŘŘŋŜăăǿY ϝLΤ yŜŜŘŜŘ dzăŜ ăLJl·ŎŜ ǿŜf2ǿ ů2 LJŋ2ǿʎŘŜ l·ŘŘŋŜăă ʎyT2ŋYl·ůʎ2y¢						
¢ŋl·yăLJ2ŋůl·ůʎ2y — Auto Mileage	miles	miles	miles	miles	miles	
Total ($ 0.76/mi)						
Ground Transportation, Parking, Tolls	$90.00		$90.00			$180.00
Airfare (coach/economy only)	$575.00					$575.00
aŜl·fă — Breakfast (up to $23) *		$20.00	$20.00			$40.00
Lunch (up to $26) *	$25.00	$25.00				$50.00
Dinner (up to $38) *	$35.00	$35.00				$70.00
[2Ř∃ʎy∃ (up to $200/night; $225/ night in Seattle; + tax and fees) *	$155.00	$155.00	$155.00			$465.00
hůKŜŋ 9ȄLJŜyăŜă (itemize): Baggage Fee	$35.00		$35.00			$70.00
Airfare Change Costs		$250.00				$250.00
¢2ůl·fă	$915.00	$485.00	$300.00			$1,700.00

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Applicant D

- ***Reimbursement Eligibility:*** **Did not elect waiver/not eligible for waiver**
  Nonrefundable travel and lodging expenses, meals, change fees, and other reasonable expenses determined to be bar-exam related.
- **Travel Mode(s):** Personal vehicle
- ***Dates of Travel:***
  - ***Arrival:*** afternoon on Monday, July 27, 2026
  - ***Departure****:* evening on Tuesday, July 28, 2026
- Original lodging was booked for 2 nights, beginning on July 27, 2026, and Applicant extended their original stay by one night in anticipation of needing to extend the test to a third day. The third night was nonrefundable.
- Applicant paid for childcare during the dates of travel.

EXPENSE REPORT CATEGORIES:

- **Transportation:** ***Auto Mileage***
  - Applicant drove from their home in Seattle, WA to the Holiday Inn in Yakima, WA on Monday, July 27, 2026 with a return trip via the same route on Tuesday, July 28, 2026.

- **Meals:** ***(all amounts inclusive of tax and tip)***
  - Applicant arrived in Yakima, WA the afternoon of Monday, July 27, 2026 and incurred dinner expenses of $35.
  - On Tuesday, July 28, 2026, Applicant incurred meal expenses for breakfast ($20), lunch ($25), and dinner ($35).

- **Lodging:** ***(all amounts inclusive of taxes and fees)***
  - Applicant booked a total of 2 nights (July 27-28, 2026) at cost of $155 per night. Although they departed on Tuesday, July 28, 2026, the costs were nonrefundable.
  - Applicant also booked a nonrefundable stay for the third night (July 29, 2026) at a cost of $170.

CHILD CARE EXPENSE REPORT

- Applicant is requesting reimbursement for payment made to a provider for childcare services.
- Childcare provider began services at 1:00pm on Monday, July 27, 2026 and ended services at 7:00pm on Tuesday, July 28, 2026.

- Childcare provider charged $30.00 per hour and was paid $750.00 in cash with no receipt.
- Childcare provider is the cousin of Applicant, named Cousin D, phone number is (123) 456-7891.
- No travel expenses were incurred by Applicant (Cousin D came to the home of Applicant).

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(Effective August 2026)

See second page for WSBA Expense Policy summary. Please fill out completely and legibly. Reimbursement checks will be payable *only* to the person incurring the expense, as documented by itemized receipts. If you incurred childcare expenses, please complete Reimbursement of Childcare for WA July 2026 Bar Exam. **Please email one PDF of this form and itemized receipts to 2026BarExamExpenses@wsba.org.**

Signed expense reports must be submitted by October 15, 2026

Make Check Payable to (Please print name): Applicant D			**PLEASE SELECT ONE** *(terms of eligibility on page 3)*
{ƫNJŜŜƫ !ŘŘNJŜăăƛ ΛƸŏƫdzŘƛƸƎ /ƛƫèƛ {ƫŀƫŜƛ ½ƛLJ (Mail check to this address): 1325 4th Avenue, Seattle, WA 98101			Elected the waiver
9πYΙ·ƛΙ: applicantD@test.org	Applicant IY 45678	tK2ƴŜ (456) 789-1012	X Did not elect waiver OR not eligible for waiver

By my handwritten or typed signature below, I certify that: (1) these expenses comply with the WSBA Expense Policy with the exception of the reimbursement for out-of-state travel as specifically allowable by the Board of Governors as part of the July 2026 exam reimbursement; (2) I am the person entitled to receive reimbursement for these expenses; (3) these expenses have not been reimbursed by any other source; (4) I am not seeking reimbursement for alcohol unless permitted by WSBA Fiscal Policy; (5) the information provided within this form is accurate and true. By accepting the travel reimbursement from the Washington State Bar Association (WSBA), the recipient releases and discharges any and all claims against WSBA, its officers, employees, agents, and volunteers arising out of or in connection with the travel, lodging, and with expenses related to the July 2026 bar exam reimbursed by the WSBA.

X: *Applicant D* Date: 08/14/2026

9·t9b{9 w9L a . ¦w{9 a 9b¢ w9v ¦ 9{¢ ƿLƫŜY ΛÎŜŘ ƞŎŜΛƫăƞŜǇdzƞŜŘǂ C2ƞ KI·ƴŘǿƞƫƫŜƴ T2ƞ Yă dzăŜ LbY 2ƴfèǂƫ

9ĚLJŜƴăŜ 5Ι·ƫŜ		07/27/2026	07/28/2026	07/29/2026			/Ι·ƫŜ3ƞè ¢2ƫΙ·ƫă
9ǀŜƴƫ 5Ι·ƫŜ		July 28 - July 30, 2026					
9ǀŜƴƫ bΙ·YŜ		Washington July 2026 Bar Exam					
¢ƞΙ·ǀŜƫ [2ŏΙ·ƫƛ2ƴǎ C2ƞYĸ¢2 ό!ŘŘƞŜăăύ ƒLƒ ƴŜŜŘŜŘ dzăŜ ăLJΙ·ŎŜ ōŜƫ2ǿ ƫ2 LJ2ǿƛŘŜ Ι·ŘŘƞŜăă ΛƸT2ƞYΙ·ƫƛ2ƴ		Home to Hotel (see addresses provided below)	Hotel to Home (see addresses provided below)				
¢ƞΙ·ƴăLJ2ƞƫΙ·ƫƛ2ƴ	Auto Mileage	143.60 miles	143.60 miles	miles	miles	miles	287.20
	Total ($ 0.76/mi)	$109.14	$109.14				$218.28
	Ground Transportation, Parking, Tolls						
	Airfare (coach/economy only)						
aŜΙ·ƫă	Breakfast (up to $23) *		$20.00				$20.00
	Lunch (up to $26) *		$25.00				$25.00
	Dinner (up to $38) *	$35.00	$35.00				$70.00
[2ŘƎƛƴƎ (up to $200/night; $225/ night in Seattle; + tax and fees) *		$155.00	$155.00	$170.00			$480.00
hƫKŜƞ 9ĚLJŜƴăŜă (itemize):							
¢2ƫΙ·ƫă		$299.14	$344.14	$170.00			$813.28

ƒ52ƒƒΙ·ƞ Ι·Y2dzƴƫă ƴ2ƫŜŘ 2ƴ ƫKƛă 9ĚLJŜƴăŜ wŜLJ2ƞƫ T2ƞ YŜΙ·ƫă Ι·ƴŘ ƫ2ŘƎƛƴƎ Ι·ƞŜ ŏ2ƴăƛŘŜƞŜŘ ƞŜΙ·ă2ƴΙ·ōƫŜ Ι·ƴŘ ƞŜƛYōdzƞăΙ·ōƫŜ LJŜƞ ²{.! ƒƛăŎΙ·ƫ LJ2ƫƛŎè wŜǇdzƛƞŜă T2ƞ ƞŜƛYōdzƞăŜYŜƴƫă ŜĚŎŜŜŘƛƴƎ ƫKŜ ăƫΙ·ƫŜŘ Ι·Y2dzƴƫă YΙ·è ōŜ ădzōƳŜŏƫƛ K2ǿŜǀŜƞ ŜĚLJŜƴăŜă ăK2dzƫŘ ōŜ ƞŜΙ·ă2ƴΙ·ōƫŜ Ι·ƴŘ LJƞdzŘŜƴƫ ƛƴǀƛƴƎ ƫKŜ ŏƛƞŏdzYăƫΙ·ƴŏŜă Ι·ƴŘ ǿƛƫƫ ōŜ ădzōƳŜŏƫ ƫ2 ²{.!Ωă ƞŜǀƛŜǿ Ι·ƴŘ ΙΓΙΛŜ ΙΣΙΙΛΓΛ ΙΛΣΙΛǀΛƫΛ ΙΙΛΙΙΛΛ

LƒèƴŜŜŘ2ƞ ŜĚLJŜƴăŜ ƞŜƛYōdzƞăŜYŜƴƫ ΛƸŏƫdzŘŜă YƛƫŜΙ·ƎŜƛ ƴdz YΙ·è dzăŜ ƫKŜ ăLJΙ·ŎŜ ōŜƫ2ǿ ƫ2 LJ2ǿƛŘŜ Ι·ŘŘƞŜăăƛƴƎ Ι·ŘŘƞŜăă ΛƸT2ƞYΙ·ƫƛ2ƴǎ

5Ι·ƫŜ	C2ƞY	¢2
07/27/2026	1325 4th Avenue, Seattle, WA 98101	802 E Yakima Ave, Yakima, WA 98901 (Holiday Inn)
07/28/2026	802 E Yakima Ave, Yakima, WA 98901 (Holiday Inn)	1325 4th Avenue, Seattle, WA 98101

WASHINGTON STATE BAR ASSOCIATION

REIMBURSEMENT OF CHILDCARE FOR WASHINGTON JULY 2026 BAR EXAM

CHILDCARE ELIGIBILITY REQUIREMENTS

Childcare expenses are reimbursable if the following criterion are met:

- Childcare expenses **must** have been incurred by the **applicant**
- Must include receipts for incurred childcare expenses
- Expenses cannot exceed $35/hour for childcare

Please fill out completely and legibly. Reimbursement checks will be payable *only* to the person incurring the expense, as documented by itemized receipts. **Please email one PDF of this form and itemized receipts to 2026BarExamExpenses@wsba.org.**

Signed expense reports must be submitted by October 15, 2026

Make Check Payable to (Please print name):
Applicant D

{ú̃ŜŜú ! ŘŘ̃Ŝăă ĭyŎfdzŘĭyƎ / ĭúèƩ {úl·úŜƩ ½ĭLJ (Mail check to this address):
1325 4th Avenue, Seattle, WA 98101

9πΥl·ĭf:	**Applicant IΥ**	**tK2yŜΥ**
applicantD@test.org	45678	(456) 789-1012

By my handwritten or typed signature below, I certify that: (1) these expenses comply with the WSBA Expense Policy unless otherwise specified as allowable by the Board of Governors as part of the July 2026 exam reimbursement; (2) I am the person entitled to receive reimbursement for these expenses; (3) these expenses have not been reimbursed by any other source; (4) the information provided within this form is accurate and true. I meet the eligibility requirements for childcare reimbursement as stated on this form. By accepting the childcare reimbursement from the WSBA, the recipient releases and discharges any and all claims against WSBA, its officers, employees, agents, and volunteers arising out of or in connection with the childcare expenses related to the July 2026 bar exam reimbursed by the WSBA.

X: *Applicant D* Date: 08/14/2026

I am requesting reimbursement for the following expense categories (*please select all that apply for incurred childcare expenses*)**:**

X **Payment made for child care services to a provider** **Amount Requested** (*itemized receipts required*): **$750.00**

If no receipt(s), provide explanation for lack of documentation, description of services, and contact information (name and phone number) of child care services provider:

My child care provider is my cousin who I paid with cash for her services. She cared for my two children (ages 8 and 10) starting on Monday, July 27, 2026 at 1:00pm until I returned on Tuesday, July 28, 2026 at 7:00pm. I paid her $25/hr for 30 hours, a total of $750. Her contact information is Cousin D, 123-456-7891.

Other **Amount Requested** (*itemized receipts required*):

Description of "Other" reimbursement requests:

If you are requesting reimbursement of expenses in excess of limits provided, provide an explanation as to why the extra cost(s) is reasonable and necessary:

HILTON GARDEN INN - YAKIMA
401 EAST YAKIMA AVENUE
YAKIMA, WA 98901
United States of America
TELEPHONE 509-454-1111 • FAX 509-248-3344
Reservations
www.hilton.com or 1 800 HILTONS

[redacted]

[redacted]

[redacted]
[redacted]

Room No:	501/K1RZ
Arrival Date:	5/18/2023 12:02:00 PM
Departure Date:	5/20/2023 1:16:00 PM
Adult/Child:	1/0
Cashier ID:	RWOODENJR
Room Rate:	169.00
AL:	
HH #	905663306 BLUE
VAT #	
Folio No/Che	[redacted]

Confirmation Number: 3372085649

HILTON GARDEN INN - YAKIMA 5/20/2023 1:16:00 PM

DATE	DESCRIPTION	ID	REF NO	CHARGES	CREDIT	BALANCE
5/18/2023	GUEST ROOM	jcamacho36	1901623	$169.00		
5/18/2023	OCCUPANCY TAX	jcamacho36	1901623	$13.86		
5/18/2023	CITY TAX	jcamacho36	1901623	$5.07		
5/18/2023	COUNTY FEE	jcamacho36	1901623	$4.00		
5/19/2023	GUEST ROOM	jcamacho36	1902037	$169.00		
5/19/2023	OCCUPANCY TAX	jcamacho36	1902037	$13.86		
5/19/2023	CITY TAX	jcamacho36	1902037	$5.07		
5/19/2023	COUNTY FEE	jcamacho36	1902037	$4.00		
5/20/2023	VS [redacted]	MONIR	1902173		($383.86)	
			BALANCE			$0.00

EXPENSE REPORT SUMMARY

	5/18/2023	5/19/2023	STAY TOTAL
ROOM AND TAX	$191.93	$191.93	$383.86
DAILY TOTAL	$191.93	$191.93	$383.86

Hilton Honors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 6,500+ hotels and resorts in 119 countries, please visit Honors.com

CREDIT CARD DETAIL

APPR CODE	67408D	MERCHANT ID	[redacted]
CARD NUMBER	VS [redacted]	EXP DATE	[redacted]
TRANSACTION ID	[redacted]	TRANS TYPE	Sale

xxxxxxxxx,

Confirmation code: [redacted]

You're all set. Thank you for booking with Alaska and we look forward to seeing you on board.

View full details about your flight reservation and fare.

VIEW/MANAGE

Flight	Departs	Arrives	Class	Traveler(s)	Seat(s)
Alaska Alaska 925 Boeing 737 800 (Winglets)	Seattle (SEA) Wed, Mar 6 3:35 pm	Spokane (GEG) Wed, Mar 6 4:39 pm	N (Coach)	[redacted]	6A★
Alaska Alaska 939 Boeing 737-800 (Winglets)	Spokane (GEG) Fri, Mar 8 5:35 pm	Seattle (SEA) Fri, Mar 8 6:49 pm	L (Coach)	[redacted]	8A★

[redacted]

Additional information

Prohibited hazardous materials

The Federal Government has specific restrictions about hazardous materials in carry-on and checked baggage. Failure to declare hazardous materials may result in civil and criminal penalties. For more information, visit: the FAA website.

Summary of airfare charges

[redacted]

Mileage Plan [redacted]

New Ticket 0272361652430

(previous ticket 0272359225849)

New Ticket Value	$411.20
Additional Amount Due	$0.00
Per person total	$0.00

Total charges for air travel **USD $0.00**

View all taxes, fees and charges

Total charges and credits

No charge

$29.99 will be deposited into the My Wallet account within 7 business days.

Spokane Intl Airport
9000 W. Airport Dr. # 204
Spokane, 99224

Main Exit 07/23/22 12 30
Receipt 004117

Short-term parking tkt
GARGE - No. 063070
07/21/22 17:24
07/23/22 12:30
Period 1d19h7'
$24 00

Total $24 00

Payment Received
AID A0000000031010
APP LABEL VISA CREDIT
CARD **********[redacted]
AUTHORIZATION 759328
TOTAL USD$24 00
T
APPROVED

Sub otal $24 00

1/1

00870E32

From: [redacted]
To:
Subject: [External]Fwd: Alaska Airlines Baggage Receipt
Date: Sunday, October 1, 2023 8:26:46 AM

Begin forwarded message:

> **From:** Alaska Airlines <Alaska.Mobile@alaskaair.com>
> **Date:** October 1, 2023 at 8:24:42 AM PDT
> **To:** [redacted]
> **Subject: Alaska Airlines Baggage Receipt**
>
> Thank you for using a mobile device to pay for your checked baggage.
>
> BAGGAGE RECEIPT
>
> The Visa card ending with *** [redacted] has been charged a total of $30.00 USD [redacted]
>
> Traveler: [redacted]
> Number of Bags: 1
> Fee: $30.00
>
> TOTAL: $30.00 USD
>
> If you have any questions, please call Customer Care at 1-800-654-5669, Monday-Friday, between 8:00 a.m. and 5:45 p.m. (PT) or Saturday between 8:00 a.m. and 5:00 p.m. (PT).
>
> Thanks again!
>
> Alaska Airlines
> http://www.alaskaair.com

scotty browns

270223 -HHH 420 1/29/25

ITEMS ORDERED	AMOUNT
1 DIET PEPSI	4.59
1 HAM & CHEESE CROISSANT-EXP	10.09
STATE INC	1.32
TOTAL DUE	16.00
PINPAD	16.00

OF GUESTS 2

****

Scotty Browns BLI Airport
www.scottybrownsrestaurant.com
4255 Mitchell Way
Bellingham WA 98226
(360) 318-7339

****

We would love to hear your feedback!
Scan the code below
to share your thoughts.

SCOTTY BROWNS
BELLINGHAM AIRPORT
4255 Mitchell Way
Bellingham WA 98226
360-318-7339

********** TRANSACTION RECORD **********

Tran. #: 375 Workstation #: 2
Table #: HHH Check #: 270223
Employee #: 420 Employee: 420
Trace #: 207533

Pre-Auth Purchase
American Express xxxxxxxxxxx[redacted]
APPROVED Chip Read

Amount USD $16.00
Tip $ 2
TOTAL $ 18

No signature required

RRN: 000000207054 C
Auth. #: 809889 Mode: Issuer
000000002/SCBRBLICC05
00 (001)
01/29/2025 7:02:10 AM

[redacted]

Customer Copy

Outlook

[External]Pane

From: Sara Fitzgerald <saralouise@gmail.com>
Date: Wed 4/1/2026 12:34 PM
To: Sara Fitzgerald <Sara@wsba.org>

PANE PANE SANDWICHES
304 UNION STREET
SEATTLE, WA 98101
206 434 8367
PanePaneSandwiches.com

ORDER: 393
Dine In

Cashier: Adilene
01-Apr-2026 12:23:07P

Transaction **159111**

1	01. MEATBALLS	$12.00
	Banh Mi Style	$0.00
	Sriracha Mayo	$0.00
Subtotal		**$12.00**
Sales Tax	10.55%	$1.27
Total		**$13.27**
CREDIT CARD SALE		$13.27

VISA 3522

Retain this copy for statement validation

01-Apr-2026 12:23:26P
$13.27 | Method: EMV
VISA CREDIT XXXXXXXXXXXX[redacted]
[redacted]
Reference ID: 609100646604
Auth ID: 077414
MID: ********[redacted]
AID: A0000000031010
AthNtwkNm: VISA

Online: https://clover.com/p
/G4Q4VWDABZZFG

Clover ID: 2YPYA53EA2HT4
Payment G4Q4VWDABZZFG

Clover Privacy Policy
https://clover.com/privacy

[redacted] [redacted]
Subject: [External]Fwd: Your receipt for rides on October 2
Date: Tuesday, October 3, 2023 9:45:03 AM

Begin forwarded message:

From: Lyft Receipts <no-reply@lyftmail.com>
Date: October 3, 2023 at 8:52:02 AM MDT
To: [redacted]
Subject: Your receipt for rides on October 2

Lyft

Your total charges for October 2

October 2, 2023 5:45 AM $83.91
Ride fare

Pickup 5:45 AM
[redacted]

Drop-off 6:16 AM
Air Cargo Rd, Seatac, WA 98158, United States

[redacted]