



EMPIRE MOCK TRIAL
EDUCATE. CONNECT. EMPOWER.

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(w) 917-426-1482
Atlanta. New York. San Francisco.
www.EmpireMockTrial.org

INVOICE

TO:

[School Name]

[Contact Person]

[Address]

[City]

[State]

[Zip]

RE: 2017 Downtown Hotel Reservation

DATE: _____

<u>Description</u>	<u>Room Rate</u>	<u># of Room Nights**</u>
Room Rate	\$175/night	X _____

TOTAL: \$ _____

**Multiply the total # of rooms you are reserving by the total # of nights you are staying

Please make all checks payable to "Empire Mock Trial" and mail to:

Daniel Matarrese
Empire Mock Trial
P.O. Box 312
Grantham, P.A. 17027

Empire Mock Trial's tax ID number is 26-0150254. W9 forms are available upon request.