

EXHIBIT 10

LIEFF, CABRASER, HEIMANN & BERNSTEIN, LLP
 TRAVEL/EXPENSE REIMBURSEMENT REQUEST FORM
 PLEASE COMPLETE FORM & ATTACH ALL RECEIPTS

TRAVELER: Terence Desauter

DATES TRAVELED: 5/22

DESCRIPTION (INCLUDING DESTINATION AND REASON FOR TRAVEL):
Meal Reimbursement. Late night Filing
till 10pm with Dean Harvey.

PLEASE LIST ALL RECEIPTS SEPARATELY:

TRANSPORTATION (INCLUDING AIRFARE, TRAIN FARE, CAB FARE, TOLLS, ETC.)

DATE	VENDOR/DESCRIPTION	AMOUNT	CASE

TOTAL:\$ _____

MEALS AND OTHER EXPENSES (INCLUDING HOTEL, TIPS, COPIES, SUPPLIES, PHONE CHARGES, ETC.)

DATE	VENDOR/DESCRIPTION	AMOUNT	CASE
<u>5/22</u>	<u>Subway</u>	<u>5.27</u>	<u>3462-1</u>

TOTAL:\$ 5.27

TRAVEL
3462-0001

MILEAGE
 _____ MILES @ \$0.56/MILE = \$ _____

meal 5.27

8950-1734 / 215238

GRAND TOTAL:\$ 5.27
 LESS CASH ADVANCE:\$ n/a
 AMOUNT DUE TRAVELER:\$ 5.27 ✓

TRAVELER'S SIGNATURE:  DATE: 5/29/2014