

TRAVEL EXPENSE FORM

AMERICAN CHORAL DIRECTORS ASSOCIATION
545 Couch Drive ~ OKLAHOMA CITY, OK 73102

NAME _____

POSITION _____

STREET _____

CITY _____ STATE _____ ZIP _____

ACDA EVENT _____

DATES OF MEETING: FROM _____ TO _____

ARRIVAL TIME AT DESTINATION _____ DEPARTURE TIME FROM DESTINATION _____

TRANSPORTATION EXPENSES INCLUDING TIPS			
FROM	TO	MODE: Air, Auto, Train, Limousine/Taxi to and from Airports	AMOUNT

TOTAL TRANSPORTATION EXPENSES

ALL OTHER TRAVEL EXPENSES INCURRED

DATE	BREAKFAST	LUNCH	DINNER	LODGING	MISCELLANEOUS		Daily Total
					Description	Amount	

TOTAL ALL OTHER EXPENSES

PLEASE ATTACH RECEIPTS FOR ALL EXPENSES

TOTAL EXPENSES	
Less Advance from ACDA (ex -\$45.00)	
TOTAL AMOUNT DUE FROM ACDA	

**Enter amount you owe ACDA here
if Total Amount Due From ACDA is a negative amount.**

Date: _____ Signature: _____