



Special Libraries Association

**BIOMEDICAL AND LIFE SCIENCES DIVISION
Travel Voucher**

**Send to current Treasurer, along with original dated receipts,
within 5 working days of travel or event.
Please print.**

Name _____

Postal Code _____

Address _____

Country _____

City, State/Province _____

Purpose _____

Date	Destination	Air/Bus/ Rail Fare	Car Mileage & Tolls*	Local Transportation, Parking	Lodging	Meals	Printing, Postage, Telephone	Tips*	Other: Explain* and list cost
Item Totals									

If you received an advance, use side 2.

Grand Total: _____

*For car mileage, report miles traveled and cost, computed from current U.S. IRS rate. Costs of meals, taxi fares, etc., should include tips, if any. Gratuities to skycaps, bellboys, etc., if any, should be reported under "tips." Use back of form for comments, explanations, etc.

I hereby certify that the above is a true and accurate statement of expenses incurred.

Signature: _____

Office use only: Paid by check _____ on _____



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Travel Voucher, Side 2

Please print.

Statement of Advance		
	Date	Amount
Balance on hand from previous voucher		
Plus advance received		
Subtotal		
Less this expense voucher		
Balance on hand this date		