

## American Accounting Association Travel and Business Expense Report Form 2025

PAYEE'S FULL NAME (First, Middle Initial, Last) PAYEE'S ADDRESS (Street, City, State, Zip Code) SELECTION COMMITTEE NAME TELEPHONE NUMBER

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Use this form to report all business expenses for which you are requesting reimbursement. This form is to be used for non-employees. **Expense reports are due within two weeks of travel.**

INCLUSIVE DATES OF TRAVEL		BUSINESS PURPOSE OF TRAVEL	
DEPARTURE DATE	RETURN DATE		

### TRANSPORTATION/LODGIN/MEALS/MISC

	DATE	HOTEL (639)	TRANSPORTATION (930)	TOLLS/PARKING (930)	MEALS (640)	MISC (990)	MISC DESCRIPTION	SUBTOTAL
1								
2								
3								
4								
5								
6								
7								
8								
	<b>SUBTOTAL</b>							

### MILEAGE

	DATE	STARTING LOCATION	DESTINATION	MILEAGE	2025 RATE	TOTAL MILEAGE (930)
1					0.70	
2					0.70	
3					0.70	
4					0.70	
5					0.70	

**PLEASE RETURN FORM AND  
ALL DOCUMENTATION TO:  
AP@AAAHQ.ORG**

<b>Total Expenses</b>	
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TRAVELER'S NAME (PRINT)	TRAVELER'S SIGNATURE	DATE
AUTHORIZER'S NAME (PRINT)	AUTHORIZER'S SIGNATURE	DATE

### General Ledger Coding (AAA Use Only)

Fund/Org Name	Fund (2)	Program (4)	Class (2)	Account (3)	Amount

### FOR FINANCE USAGE ONLY

AP Entry	
Finance Review 1	
Finance Review 2	
Check Signer	