

Aberdeen Amateur Hockey Association

Travel Voucher Form:

Date: \_\_\_\_\_

To: AHA Treasurer

From: \_\_\_\_\_

Mail To:

Jerry Drees- AHA Treasurer  
37970 132<sup>nd</sup> Street  
Aberdeen, SD 57401

Date(s) of  
Travel: \_\_\_\_\_

Reason for Travel: \_\_\_\_\_

Mileage: \_\_\_\_\_ miles @ \$0.585 \$ \_\_\_\_\_

Lodging: \$ \_\_\_\_\_

Meals: \$ \_\_\_\_\_

Other: \$ \_\_\_\_\_

Total Amount Requested: \$ \_\_\_\_\_

\*\* Actual receipts must be attached to the reimbursement form for lodging and meal reimbursement.