

# EXPENSE REPORT

PLEASE PRINT CLEARLY!!

**ACM SRC Participant**

Name:	CONFERENCE NAME	Date
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ACM Student Member #	Address:	Email:
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	SUN	MON	TUE	WED	THU	FRI	Sat	EXPENSE TOTAL
Day Date								
AIR, RAIL TRANSPORT								
TAXI, LIMO								
HOTEL								
MEALS								
BUSINESS MEALS								
AUTO MILEAGE								
PARKING & TOLLS								
TIPS								
REGISTRATION								
MISCELLANEOUS								
SUPPLIES, COPYING								
MISCELLANEOUS								
SUBTOTAL								
							<b>Total Due:</b>	

**Mileage:** from, to, and distance traveled at \$.53.5 per mile

**Meals:** not to exceed **\$50(US); \$60(Non-US)** per day; include date, place, meeting subject, and persons

**All Miscellaneous Expenses**

EXPLANATION OF EXPENSES (Attach an additional sheet if necessary):
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**For international students only: for wire transfer, the ACM finance department requires the following:**

**Bank Name/Branch/Address:**

**Swift Code:**

**Full Name on Account:**

**Phone Number:**

**Bank Account Number:**

**Omitting any of this information will cause a delay in processing**

YOU MUST ATTACH ALL RECEIPTS FOR ALL EXPENSES ABOVE **\$25.00 US**.

Mail to: Association for Computing Machinery  
 Attn: Nanette Hernandez  
 2 Penn Plaza, Suite 701  
 New York, N.Y. 10121-701  
 or Email: [hernandez@hq.acm.org](mailto:hernandez@hq.acm.org)

SIGNED: \_\_\_\_\_

APPROVED: \_\_\_\_\_

DATE: \_\_\_\_\_

DATE: \_\_\_\_\_