



### BDA Travel Form

#### Traveler Information

Traveler's Name:		
Departing Address:		
Destination Address:		
Departure Date/Time	Day:	Time:
Return Date/Time	Day:	Time:

Traveler Signature

Print Name

Date

#### Agency Pre-Travel Approval:

Signature

Print Name/Title

Date

#### Trip Expenses

Lodging	Total Nights	Total Paid	<i>Receipt submission required.</i>
Mileage	Total Miles		<i>Mileage is calculated from current business address to address where exams are performed.</i>
Incidentals	Total Paid		<i>Examples: Public Transportation, Railroad, Shuttle, etc.</i>

Traveler Signature

Print Name

Date

#### Agency Travel Expenses Approval:

Signature

Print Name/Title

Date