



SCMEA Orchestra Division
Expense and Travel Voucher

Updated 9/18/10

(Please check one)

- All-State or Region Orchestra
Concert Festival
Solo/Ensemble Festival
SCMEA Conference

Name: Date:
Mailing Address:
City/State: Zip Code:
Purpose of Reimbursement:

Enter all amounts which apply:

Signature of recipient
Authorized Signature

Honorarium:

Wage: hours @ per hour

Mileage: miles @ \$.4450 per mile

To:

From:

Service Fees:

meals/hotels-
(receipts must be attached)

per diem (meals only)

Total Payment Requested:

Mail this form to:
Sharon Doyle
257 Hollis Drive
Spartanburg, SC 29307

Service Fees

Table with 2 columns: Service Fee Type and Amount. Includes rows for All-State Solo Judge, Solo/Ens. Festival Judge, Concert Fest. Judge, All-State Conductor, Region Orch. Conductor, and Conductor per diem.

(Incomplete forms will be returned delaying payment)