Payment Schedule:

Trip name/ CBO: **Total Reservation: $**_____
Passengers: **Total Per Person: $**_____
                                        Deposit Due date: /   /
                                        Amount: $_____
                                        Final Payment Date: /   /
                                        Amount: $_____

Name of Payee	Amount	Date	Check #/Type
		Total:	

CBO ENTRY: Y   N
INSURANCE: Y   N
TRANSFERS: Y   N