EMPLOYEE TRAVEL EXPENSE REPORT

Purpose of Travel :
Reimbursement Address :
Employee Name :
Department :

Pay Period	
From	To

Date of Travel	Description	Transportation	Lodging	Meals	Misc. Expenses	Daily Total
						$
						$
						$
						$
						$
						$
						$
						$
						$
		$	$	$	$	

Don't forget to attach receipts

TOTAL EXPENSES : $

Employee Signature		Date	
Authorizer Signature		Date	

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