

EXPENSE REPORT

EMPLOYEE _____ # _____ DATE _____

ADDRESS _____

CITY _____ REPORTING PERIOD:

STATE _____ ZIP _____ FROM _____

DEPARTMENT _____ TO _____

BRANCH / REGION / ZONE _____ TRAVEL AUTHORIZED BY _____

TRAVEL MILEAGE FROM CITY TO CITY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
From _____ To _____							
From _____ To _____							
From _____ To _____							
From _____ To _____							
From _____ To _____							
From _____ To _____							
From _____ To _____							
From _____ To _____							
From _____ To _____							
From _____ To _____							
From _____ To _____							
Total Travel Mileage							
Mileage at _____ ¢/mile							
Gas / Oil / Lube							
Parking and Tolls							
Auto Rental							
Local Travel - Cab / Limo							
Air / Rail / Bus							
Hotel							
Breakfast							
Lunch							
Dinner							
Laundry							
Phone / Fax							
Tips							
Misc.:							
Total Expenses / Day							

SUMMARY OF ENTERTAINMENT CHARGES

DATE	ITEM	PERSON / TITLE ENTERTAINED	REASON ENTERTAINED	TOTAL # IN PARTY	RECEIPT ATTACHED	AMOUNT

Purpose of Trip _____ Signature / Title _____ Date _____ Approval Signature / Title _____ Date _____	EXPENSE REPORT SUMMARY Total Expenses _____ Less Cash Advance _____ Less Charges to Company _____ Balance <input type="checkbox"/> Company <input type="checkbox"/> Employee Check Issued: Date _____ # _____
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