

# 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 _____	<b>EXPENSE REPORT SUMMARY</b> 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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