

TRAVEL EXPENDITURE FORM
Used to clear a travel advance from Accounts Payable
OR to be reimbursed for travel expenses
Please clear within 15 days of return from trip.

NAME: _____ DATE REQUESTED: _____

POSITION: _____ DEPARTMENT: _____

ADVANCE ISSUED? yes _____ no _____ CHARGE TO ACCOUNT: _____

DESCRIBE REASON FOR TRAVEL & EXPENDITURES: _____

*** **

I. TRAVEL

DATE DESTINATION / PURPOSE / VIA MILEAGE AMOUNT

** mileage reimbursed @ .56 cents per mile

SUBTOTAL: _____

II. LODGING

DATE ESTABLISHMENT / LOCATION AMOUNT

SUBTOTAL: _____

III. MEALS

DATE BREAKFAST / LUNCH / DINNER / ESTABLISHMENT AMOUNT

*** employee=s meals only

SUBTOTAL: _____

IV. OTHER EXPENDITURES

DATE TAXI / PARKING / TIPS / MISC. EXPENSES AMOUNT

SUBTOTAL: _____

V. ENTERTAINMENT

DATE NAME / AFFILIATION / ESTABLISHMENT / PURPOSE AMOUNT

*** must contain detailed info. to receive reimbursement

SUBTOTAL: _____

*** **

SUBTOTAL OF ITEMS I. THROUGH V. \$ _____

LESS ADVANCE - _____

Employee Signature LESS PERSONAL EXPENSES - _____

Approval Signature TOTAL AMOUNT TO BE REIMBURSED OR RETURNED \$ _____