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 @ .67 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   - _____

_____   LESS PERSONAL EXPENSES   - _____
Employee Signature

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