

COMPANY:

EXPENSE REPORT

Name:		Department:					Week Ending:		
Day of Month:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	TOTAL	ACCOUNT#
Location:								-	
Lodging (excluding meals)								-	
Telephone & Postage								-	
Personal Auto @ .51/mi	-	-	-	-	-	-	-	-	
Parking & Tolls								-	
Car Rental/Taxi								-	
Airline/Bus/Train								-	
Professional Dues								-	
Other (explain)								-	
TOTAL	-	-	-	-	-	-	-	-	
Breakfast								-	
Lunch								-	
Dinner								-	
Entertainment (explain)								-	
TOTAL MEALS & ENTERTAIN	-	-	-	-	-	-	-	-	
TOTAL EXPENSES	-	-	-	-	-	-	-	-	

EXPLANATORY NOTES							Less Paid By	
List business purpose of each trip. Receipts required for all lodging and meals and for other expenses >\$10.00.							Company	
Date							Net Due To	
							Employee	-
							Signed by:	
							Date:	
							Approved by:	
							Date:	

PERSONAL AUTO

Date: _____

Day: _____

Miles: _____

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	TOTAL

Enter mileage into cells and will autocalculate/fill above.