



# Expenses Report

Name		Employee ID	
E-mail		Department	
Purpose		Approved by	

Fuel	Dates	Gallons	Location – Attach Receipts

Expenses	Dates	Details				Amount
Transportation		<input type="checkbox"/> Air	<input type="checkbox"/> Taxi	<input type="checkbox"/> Rental car	<input type="checkbox"/> Other	
Own car		Mileage				
Lodging		Location				
Meals						
Other						
<b>Subtotal</b>						
<b>Less amount paid by company</b>						
<b>Total amount owing to employee</b>						

Signature	Date
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Please attach receipts for all listed expenses, sign the form and send to the Accounting Department.