

EXPENSE REPORT
(Request for Reimbursement)

To: _____

From: _____

Purpose of Travel: _____

Dates of Travel: _____

Personal vehicle mileage from: _____ to _____
_____ and return.

_____ miles @ _____ per mile. \$ _____ due

Tolls: \$ _____

Parking: \$ _____

Hotel: \$ _____

Meals:* \$ _____ ** Include reimbursement form from Auditor*

Fares: \$ _____

Other: \$ _____

Cell Phones:* \$ _____ **Attach copy of cell phone bill with Business call(s) marked.*

Non-reimbursable expense: (tips, liquor, entertainment, tax, etc.)

I do certify that all the above expenses incurred were business related.

Signature: _____ Date: _____

Note: Attach all receipts including credit card receipts to this report.

Comments/Explanations: _____

_____.

Total amount due this report \$ _____

Supervisor/Appointing Authority: _____

Date: _____

File in employee file