



TRAVEL & BUSINESS EXPENSE REPORT

EMPLOYEE'S NAME:	EMPLOYEE'S PAYROLL ID # E -
EMPLOYEE'S HOME ADDRESS:	DEPARTMENT NAME
	REQUISITION # X -
PURPOSE OF TRAVEL/BUSINESS: _____	
We certify that the following expenses were charged and incurred in accordance with College policy and reimbursement is not being provided by any other source.	
AUTHORIZING SIGNATURE:	
_____ EMPLOYEE'S SIGNATURE	_____ DATE
(Please Print) » NAME _____ » TITLE _____ DATE _____	

DATE OF EXPENSE	DESCRIPTION OF EXPENSE	(A) PAID BY EMPLOYEE	(B) PAID BY COLLEGE
	Air/Rail Fare	.	.
	Private Auto	.	.
	Hotel	.	.
		.	.
		.	.
		.	.
		.	.
		.	.
		.	.
TOTAL EXPENSES PAID BY EMPLOYEE:		.	.
		TOTALS	
COST CENTER	OBJECT CODE	AMOUNT	
			1. Total Expenses (Columns A&B)
		.	2. Total Expenses Paid by Employee (Column A)
			3. Less: Travel Advance – Check # _____
			- 73000 Credit Memo
			If Line 3 is more than Line 2: AMOUNT DUE TO FIT
			.
	Column (A)		If Line 3 is less than Line 2: AMOUNT DUE TO EMPLOYEE
			.

FOR ACCOUNTING USE ONLY: _____
Reviewed by: _____ Date _____