

# Travel and Transportation Expense Report

Document No.: \_\_\_\_\_

Name:  Department:

Purpose of Travel:

Travel Dates:  to

Destination:

Date	Description	Transportation Mode	From	To	Amount (USD)	Remarks
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Total Amount Claimed (USD):

\_\_\_\_\_  
Employee Signature  
Date: \_\_\_\_\_

\_\_\_\_\_  
Supervisor/Manager Approval  
Date: \_\_\_\_\_

- Attach all relevant receipts and proof of expenses.
- Ensure entries comply with company travel and expense policies.
- Submit the completed form within the required timeframe after travel.
- Provide clear and accurate information for timely reimbursement.