

Travel Expense Audit Report Form

Employee & Trip Information

Name: _____

Department: _____

Employee ID: _____

Destination: _____

Purpose of Travel: _____

Travel Dates: ____ / ____ /20__ to ____ / ____ /20__

Expense Summary

Date	Category	Description	Amount (USD)	Receipt Attached
__/__/20__	Transportation	Taxi from airport	_____	Yes / No
__/__/20__	Accommodation	Hotel stay	_____	Yes / No
__/__/20__	Meals	Lunch with client	_____	Yes / No
Total				_____

Reviewer Comments

Reviewed By: _____ Date: ____ / ____ /20__

Important Notes:

- All expenses must be supported by original receipts or proper documentation.
- Ensure each entry clearly states its business purpose.
- Incomplete or unsubstantiated claims may result in reimbursement delays or denials.
- Submit the completed report within the specified time frame after travel.
- Adhere to the company's travel and expense policy at all times.