

Travel Expense Receipt

Employee Name: _____
Employee ID: _____
Department: _____
Date Submitted: ____/____/_____
Purpose of Travel: _____

Expense Details

Date	Description	Category	Amount
____/____/____	Airfare	Transportation	\$_____
____/____/____	Hotel Accommodation	Lodging	\$_____
____/____/____	Meals	Food	\$_____
____/____/____	Taxi Fare	Transportation	\$_____
Total			\$_____

Approval

Employee Signature: _____
Date: ____/____/_____
Manager Approval: _____
Date: ____/____/_____

Important Notes

- All original receipts and supporting documents should be attached.
- Each expense must comply with the company travel policy.
- Incomplete forms or missing approvals may delay reimbursement.
- Submit expense receipts within the designated timeframe after travel.