

# International Travel Expense Reimbursement Form

Name: \_\_\_\_\_  
Employee ID: \_\_\_\_\_  
Department: \_\_\_\_\_  
Designation: \_\_\_\_\_  
Travel Destination: \_\_\_\_\_  
Purpose of Travel: \_\_\_\_\_  
Travel Dates: \_\_\_\_\_  
Date of Submission: \_\_\_\_\_

## Expense Details

Date	Description	Amount (Currency)	Exchange Rate	Amount (Local)	Receipts Attached
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
Total					

Advance Received (if any)

Amount: \_\_\_\_\_  
Date Received: \_\_\_\_\_

## Bank Details for Reimbursement

Bank Name: \_\_\_\_\_  
Account Number: \_\_\_\_\_  
IFSC / SWIFT Code: \_\_\_\_\_  
Account Holder Name: \_\_\_\_\_

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

## Important Notes:

- Attach all original receipts/invoices for claimed expenses.
- Ensure expenses comply with the company's travel policy.
- Provide currency exchange proof when relevant.
- Incomplete forms or missing documentation may delay processing.
- This form must be approved by the designated authority before reimbursement.