

Business Travel Meal Expense Report

Employee Name: _____

Department: _____

Report Date: ____ / ____ / ____

Trip Purpose: _____

Destination: _____

Date	City	Breakfast	Lunch	Dinner	Total	Receipt Attached	Comments
____ / ____ / ____	_____	_____	_____	_____	_____	Yes / No	_____
____ / ____ / ____	_____	_____	_____	_____	_____	Yes / No	_____
____ / ____ / ____	_____	_____	_____	_____	_____	Yes / No	_____
Grand Total					_____		

Employee Signature: _____

Date: ____ / ____ / ____

Manager Approval: _____

Date: ____ / ____ / ____

Important Notes:

- Attach all relevant meal receipts to support your claims.
- Expenses should comply with the company's Travel & Expense Policy.
- Incomplete or late submissions may cause reimbursement delays.
- Personal and alcoholic beverage expenses are not reimbursable.
- Ensure approval is obtained from your manager or supervisor.