

Expense Report Form - 2025

Department Number & Name _____

Employee Name _____

Position _____

Manager _____

Date _____

Submitted _____

Description (To/From Destination)	Date	G/L Account	Airfare	Lodging	Transportation (Gas, Rental-Car, Taxi, Tolls, Parking)	Conferences & Seminars	Phone	Meals	Mileage	Mileage @ \$0.70/mi	Misc.	Total
										0.00		0.00
										0.00		0.00
										0.00		0.00
										0.00		0.00
										0.00		0.00
										0.00		0.00
										0.00		0.00
										0.00		0.00
										0.00		0.00
										0.00		0.00
										0.00		0.00
										0.00		0.00
										0.00		0.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.0	0.00	0.00	0.00
Total												0.00

Employee _____

Manager