

Weekly Employee Expense Report

Employee Name: _____ **Date From:** _____

Company/Unit: _____ **Date To:** _____

Expenses	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total
1. Travel Expenses								
Airlines								
Car Rental								
Bus/Shuttle								
Cab/Limousine								
Tips								
2. Meals								
Breakfast								
Lunch								
Dinner								
Daily Allowance								
3. Lodging								
Hotel Name								
Room Charge								
Per Diem								
4. Automobile Expenses								
Mileage: Ending								
Starting								
Total								
X rate								
5. Entertainment								
Business Purpose								
Place								
Amount								
6. Other Expense								
Postage								
Telephone								
Office Expenses								
Total Expenses Reimbursed								

Notes: _____

Employee's Signature: _____ **Date:** _____

Note: All receipts should be attached.