EMPLOYEE EXPENSE REPORT

NAME:

DATES

DATE	CLIENT CODE	CLIENT/PROJECT NAME	PARKING/ TOLLS	TAXI/TRAIN & TIPS	TRANS. @.32/MILE	MEALS	HOTEL	PROMOTION	SUNDRY	TOTAL /CLIENT
										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
								TOTAL	EXPENSES	**0.00**

Signature _____ **Date** _____

Approval _____ **Date** _____

Accounting	
Received Date	
Paid Date	
Check #	