

TRAVEL ACCOMMODATION EXPENSE TRACKER

Lodging & Accommodation Details

Employee Name:

Department:

Purpose of Travel:

Submission Date:

Travel Start Date:

Travel End Date:

DATE	HOTEL / ACCOMMODATION	LOCATION	CHECK- IN	CHECK- OUT	NIGHTS	DAILY RATE	TAXES/FEES	TOTAL COST

Total Nights	
Subtotal Lodging	
Total Taxes & Fees	
Grand Total	

EMPLOYEE SIGNATURE DATE

AUTHORIZED APPROVER SIGNATURE DATE