

INTERNATIONAL TRAVEL REIMBURSEMENT CLAIM

Expense Report Template

1. TRAVELER INFORMATION

EMPLOYEE FULL NAME

EMPLOYEE ID

DEPARTMENT / COST CENTER

JOB TITLE

MANAGER / APPROVER NAME

2. TRIP DETAILS

DESTINATION (CITY, COUNTRY)

DEPARTURE DATE

RETURN DATE

BUSINESS PURPOSE OF TRAVEL

3. EXPENSE BREAKDOWN

Date	Expense Category (e.g., Flight, Hotel, Meal)	Description / Vendor Name	Foreign Currency	Foreign Amount	Exchange Rate	Amount (Local)
	<input type="text"/>					
	<input type="text"/>					
	<input type="text"/>					
	<input type="text"/>					
	<input type="text"/>					

Total Claimed Amount:

Less: Cash Advance Received:

Net Reimbursement Due:

4. AUTHORIZATION SIGNATURES

Traveler Signature

Date:

Authorized Approver Signature

Date: