

EMPLOYEE BUSINESS TRAVEL MEAL EXPENSE REPORT

Employee Name: _____ Department: _____

Travel Destination: _____ Purpose of Travel: _____

Departure Date: _____ Return Date: _____

DATE	LOCATION / CITY	MEAL TYPE (BREAKFAST / LUNCH / DINNER)	BUSINESS PURPOSE & ATTENDEES	ESTABLISHMENT NAME	RECEIPT (Y/N)	AMOUNT

Subtotal	
Tips / Incidentals	
Total Claimed	

Employee Signature

Date

Manager / Approver Signature

Date