MONTHLY STAFF TRAVEL REIMBURSEMENT

Payroll Ledger

PAY PERIOD / MONTH:
LEDGER CODE:
PREPARED BY:
APPROVED BY:

DATE	EMPLOYEE NAME	DESTINATION	PURPOSE OF TRAVEL	PERSONAL VEHICLE			RECEIPTED EXPENSES				TOTAL CLAIM	ACCOUNT CODE
				MILES/KM	RATE	AMOUNT	TRANSPORT	LODGING	MEALS	INCIDENTALS		
			TOTALS									

PREPARED BY (PAYROLL CLERK)
Date: _____

REVIEWED BY (FINANCE MANAGER)
Date: _____

AUTHORIZED SIGNATURE
Date: _____