

HOOD COLLEGE
EXPENSE REPORT

ATTACH ORIGINAL RECEIPTS AND OTHER SUPPORTING DOCUMENTATION

NAME:			PERIOD ENDING:					
DEPARTMENT:			PURPOSE OF TRIP/EXPENSE:					
G/L Acct. #								
	SUN	MON	TUES	WED	THUR	FRI	SAT	TOTAL
DATE								
TRANSPORTATION								-
AIRFARE, TRAIN, BUS								-
CAR RENTAL								-
TAXI, TOLLS, PARKING								-
MILEAGE								
Number of miles								
Mileage at .70 cents per mile	-	-	-	-	-	-	-	-
LODGING								-
MEALS (including tip)								-
HOSPITALITY (explain below)								-
REGISTRATION FEES								-
MISCELLANEOUS (explain below)								-
TOTAL EXPENSES	-	-	-	-	-	-	-	-
Distribution Instructions: (check one)					Less Advances			
MAIL	Address:			Balance due College				-
CAMPUS MAIL	Mail Box #, if applicable:			Balance due Employee				-
EXPLANATIONS								
Date	Type of Expense & G/L #		Purpose, Names & Affiliation of Attendees					Amount
Employee Signature:				Approved By:				
Date:				Date				