Travel Expense Form**

(Complete upon return from conference/travel)

Name of Conference:		**Employee Name:**
Location:	**Conference Date(s):**	**Department:**

Include expenses incurred and indicate whether reimbursable or charged to ENLC VISA. Attach VISA approval forms, as appropriate.

DATE:	**MON**	**TUES**	**WED**	**THURS**	**FRI**	**SAT**	**SUN**	**TOTAL Charged on ENLC VISA**	**TOTAL Reimburse-ment Request**
AIR TRAVEL									
If You Drove BEGINNING ODOMETER READING								**XXX**	**XXX**
ENDING ODOMETER READING								**XXX**	**XXX**
COST (MILES X CENTS PER MILE or GAS)									
HOTEL/MOTEL									
*** BREAKFAST $**									
*** LUNCH $**									
*** DINNER $**									

**A copy of the Conference Pre-approval Form and original receipts for all expenses must be attached to this form and after approval, submitted to bookkeeper for reimbursement. ENLC staff must report time worked on payroll time sheet.

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MISCELLANEOUS Taxi/Parking/Etc.									
TOTAL								**$**	**$**

*** Maximum Food allowance per diem and per meal is pre-determined by the Director of HR based on location of conference.**

SIGNATURE _____ DATE APPROVED BY _____

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