

# TRAVEL REIMBURSEMENT

Reference No: \_\_\_\_\_  
Submission Date: \_\_\_\_\_

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Employee Name \_\_\_\_\_

Employee ID \_\_\_\_\_

Department \_\_\_\_\_

Purpose of Travel \_\_\_\_\_

Destination \_\_\_\_\_

Travel Period (Dates) \_\_\_\_\_

Date	Category	Description / Business Justification	Amount

Subtotal \$ \_\_\_\_\_

Tax / VAT \$ \_\_\_\_\_

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**Total Reimbursement \$ \_\_\_\_\_**

Employee Signature  
Manager Approval  
Finance Department