

# OVERSEAS BUSINESS TRAVEL REIMBURSEMENT

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EMPLOYEE NAME

EMPLOYEE ID

DEPARTMENT

DESTINATION CITY/COUNTRY

TRAVEL START DATE

TRAVEL END DATE

Date	Description / Category	Currency	Amount (Foreign)	Exchange Rate	Total (Local)

Subtotal:

Tax/VAT:

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**TOTAL REIMBURSEMENT:**

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CLAIMANT SIGNATURE

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APPROVER SIGNATURE