

St. John's Episcopal Church

Travel Expense Report

574 S. Sheldon Road
 Plymouth, MI 48170
 734-453-0190

Name: _____

Address: _____

Phone Number: _____

Purpose: _____

Food -Lodging-Airfare-Misc.							
Date(s)	Airfare/ Misc.	Lodging	Breakfast	Lunch	Dinner	Total (Line)	Comments/ Guest Entertained-Location
Totals							

Rental Automotive Expense		
Date(s)	Item	Amount
	Rental	
	Rental	
	Gasoline	
	Gasoline	
	Total	

Personal Car Expense				
Date	Location	Miles Driven	Mileage Rate/Mile*	Line Total
			Cents	
			Cents	
			Cents	
* Use current IRS mileage rate. Mileage covers the cost of operating an automobile, including gasoline.			Total	

Summary of Reimbursable Expenses	
Item	Amount
Food-Lodging-Airfare	
Rental Car Expense	
Personal Car Expense	
Total	

Note: Receipts for Reimbursable Expenses should be attached.

Submitted By: _____

Date: _____

Approved for Payment by: _____

Date: _____