

BAMSI EMPLOYEE EXPENSE REPORT

Employee Name _____ Program Name _____ Date From _____ Date To _____
 Employee Clock # _____ Allocate (Yes/No) _____ One Way Commute Miles _____

Date	Travel From	Odometer Reading	Travel To	Travel To	Odometer Reading	Commute Miles	Auto Expense Mile @ Amt		Parking & Tolls	Other Exp *	Total Amount	Purpose of Expense	Program #
								0.40					
								0.40					
								0.40					
								0.40					
								0.40					
								0.40					
								0.40					
								0.40					
								0.40					
								0.40					
								0.40					
								0.40					
								0.40					
								0.40					
TOTAL								0.40					

- 1- * Other expenses must be explained in detail on the reverse side.
- 2- When expense listed is for meals or entertainment for others, list on reverse side:
 - a. Date and name of the place where meals or entertainment were furnished
 - b. Occupation, name, title or person to whom meal, entertainment was furnished
- 3- Attach paid receipts for all expenses.

Plus Advance	
Less Advance	
Amount Due	

Business Use Only:

Agency Invoice # : _____
 G/L Expense Code: _____
 Batch # : _____
 Date: _____
 Entered By: _____

Employee Signature _____ Supervisor Signature _____