

PLAINSBORO FIRE DISTRICT No. 1

TRAVEL EXPENSE REPORT

Date:							
Employee:				Expense Summary			
Travel Location:				Total Trip Days			
Address:				Transportation Expense			
City:		State:	Zip:	Lodging Expense			
Trip Dates:	Start on:		End on:	Meal Expense			
Purpose of Trip:				Total Trip Expenses			
Date:	Transportation			Lodging	Meals		
	From (Origin)	To (Destination)	\$	\$	Breakfast	Lunch	Dinner
Total							

Completed By: _____

Approved By: _____