



Boston College EXPENSE REPORT

(Refer to the BC Travel Policy and Instructions before completing)

Expense Report #

Employee's Name: _____
 Department: _____
 Extension: _____

Business Purpose of Expense:

Description of Expense

#Days: _____ Destination: _____ Beginning: _____ Ending: _____

PART 1: TRANSPORTATION

Date(s)	Mode	From: City/State/Country	To: City/State/Country	Round Trip (X)	Miles	Rate	Amount

TOTAL Transportation Expenses Subtotal 1 \$ _____

PART 2: TRAVEL EXPENSES

Date(s)	Location	Lodging	Breakfast	Lunch	Dinner	Miscell. \$	Description of Expense	Amount

TOTAL Travel Expenses Subtotal 2 \$ _____

PART 3: OTHER EXPENSES

Amount

Certification: I certify that all expenses reported here are appropriate and necessary to the objective of the travel and that no other reimbursement will be forthcoming:

Signature of Employee _____

Authorized Approval _____

Total of Other Expenses Subtotal 3 \$ _____

PART 4: SETTLEMENT

Total Travel Expenses (1+2+3):	
Less: Personal/Other Funding:	
Net Travel Expenses:	\$ _____
Less: Advances from Boston College:	

PART 5: ACCOUNT DISTRIBUTION

REPORT TOTAL: \$							
Distribution	Dept	Fund	Fund Source	Program	Function	Property	Account
%							
%							

If funded by a grant or capital project please include the following values:

Distribution	Project	PC Bus Unit	Activity	Res Type	Category	Sub-Cat
%						
%						

Attn Supervisors: Be sure account information and descriptions are filled in before signing travel report.