

Calendar Year: _____

	City of Buellton Travel/Training Expense Report
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Employee Name: _____

Date(s) of Travel: _____

Location (Destination): _____

Description of Event: _____
(Attach Flyer with event information)

-- Account for all expenses incurred for conferences and meetings

--No reimbursement will be made without a receipt

Portion to be completed by Finance Department:

Travel and Meeting Expenses Paid by City				
Date	Description (registration, lodging, meals, etc.)	City CC	City Check	Total Amount
TOTAL (B):				

Summary	
TOTAL (A):	
TOTAL (B):	
Net Due to Requestor (A less B)	

Allocate Amount from Summary to Account Below	
Account Number:	