

CHECK REQUESTED

DIRECT DEPOSIT



**TRAVEL EXPENSE REPORT**  
SOCIETY OF MANUFACTURING ENGINEERS  
ONE SME DRIVE, P.O. BOX 930  
DEARBORN, MI 48121-0930

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TITLE \_\_\_\_\_

PERSONAL CC# \_\_\_\_\_

NON-SME STAFF SSN: \_\_\_\_\_

TRAVEL REIMBURSEMENT

DATE \_\_\_\_\_

EXPENSE REIMBURSEMENT

PURPOSE OF TRAVEL/EXPENSE: \_\_\_\_\_

CHARGE TO ACT/PROJ/CC: \_\_\_\_\_

PAGE# \_\_\_\_\_

ENTER DATES							TOTALS
ORIGIN							
DESTINATION							
DAILY MILEAGE							0
Mileage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Airfare							\$ -
Parking & Tolls							\$ -
Taxi & Bus Fares							\$ -
Lodging							\$ -
Tips & Baggage							\$ -
Telephone/FAX							\$ -
Other (Explain Below)							\$ -
1							\$ -
2							\$ -
3							\$ -
4							\$ -
5							\$ -
<b>SUB TOTAL TRAVEL</b>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Meals Breakfast (w/tip)							\$ -
Lunch (w/tip)							\$ -
Dinner (w/tip)							\$ -
Guests: <i>Explain on back</i>							\$ -
<b>MEALS &amp; GUESTS TOT.</b>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>GRAND TOTAL</b>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

<b>HEADQUARTERS USE ONLY</b>		I hereby certify that all expenses claimed above were incurred on official SME business and I am not accepting reimbursement for these expenses from more than one party.	<b>GRAND TOTAL (ALL PAGES)</b>	
Accounting Distribution			Less Charges	
ACT/PROJ/CC/OBJ	Amount		Travel Advance Amount	
			VO#	
			Less SMEEF Donation	
		SIGNATURE: _____	<b>BALANCE DUE PAYEE</b>	\$ -
		STAFF APPROVAL: _____	<b>(DEBIT TOTALS PAYABLE TO SME)</b>	
		STAFF APPROVAL: _____	Completed Travel Expense Reports must be submitted for approval within 60 days from the date of travel. All travel must include a brief trip report except in the case of meetings or travel where minutes will be produced and distributed following the meeting.	
		ADMINISTRATIVE REVIEW: _____		
		BY: _____		
ACCOUNTING REVIEW BY: _____		BY: _____		
		EXCHANGE RATE: _____	CURRENCY: _____	

BE SURE TO ENTER ANY CHARGED EXPENSES ON FRONT OF FORM, EXPLAIN ON THE REVERSE SIDE AND ATTACH ORIGINAL RECEIPT FOR AIR TICKETS, HOTEL BILLS, ETC.