



Expense Report

ITA, Inc. 2162 Dana Ave. Cincinnati, OH 45207 ap@ita.com

Accounting Use Only			
Name:	Mileage Rate		Meal Total: <i>Acct#5000/6225</i>
Charge To Site or Dept:	Breakfast Rate	<i>overnight travel only</i>	Hotel Total: <i>Acct#5000/6250</i>
Start Date:	Lunch Rate	<i>overnight travel only</i>	Transp/Mileage Total: <i>Acct#5700</i>
End Date:	Dinner Rate	<i>overnight travel only</i>	Other Total: <i>Acct#6395</i>
Purpose/WO#:	Effective Date:		Grand Total: _____

Please attach original receipts to report

Date	Description	(12am-11am)	(11am-5pm)	(5pm-11pm)	Entertain \$	Meal Total \$	Hotel \$	Transport/	Mileage start	Mileage End	Mileage \$	Other \$	Entertainment/Other/ Description
		Breakfast \$	Lunch \$	Dinner \$				Parking \$					

I certify that the above expense represent only items related to company business and contain no items of a personal nature.

Comments:

Employee Electronic Signature | Date Signed

Approvals:

Supervisor Electronic Signature | Date Signed

Accounting Electronic Signature | Date Signed