

Expense Report

Iowa Association of REALTORS®
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 Clive, IA 50325
 (515) 453-1064
 Fax: (515) 453-1070

Employee Name:

Date:

DAILY EXPENSES FOR THE WEEK OF:

ITEM	SUN	MON	TUES	WED	THU	FRI	SAT	TOTAL
Breakfast								
Lunch								
Dinner								
Lodging								
Telephone								
Car rental, taxi, bus								
Parking or towing								
Tips								
Airfare								
Daily Total								
TOTAL								

ENTERTAINMENT

DATE	WHO	PLACE	BUSINESS	AMOUNT
TOTAL				

OTHER EXPENSES

DATE	DESCRIPTION	AMOUNT
TOTAL		

TOTALS

TOTAL FROM ABOVE	
MINUS ADVANCE	
TOTAL DUE EMPLOYEE	

Employee Signature

Approved By