

HARAMAYA UNIVERSITY
TRAVEL EXPENSE REPORT FORM

Date _____

1. Name & Signature _____
2. College /School/Department/Directorate/offices _____
3. Salary _____
4. Means of Travel Air ☐ HU Vehicle ☐ Bus ☐

A. Calculation for daily subsistence allowance

No	Departure			Destination			For finance office only	
	From	Date	Time	Breakfast	Lunch	Dinner	No of days	Total Per-diem

B. Places where the employee stayed which on duty

No	Date	Pass the night at Region/ Town	No of days	For finance office only
	Total			

Name & Signature of the employee _____

Prepared by Name & Sign. _____

Approved by Name _____

Approved by Name _____

Signature _____

Signature _____

Note: Please attach the travel report.