Perform Air International, Inc. **Employee Expense Report**

Employee Name: _____	Beginning Balance per Activity Report: _____
Social Security Number: _____	Total Section 1: _____
Account Number: _____	Total Section 2: _____
Expenses Report Period Covered: _____	Total Section 3: _____
Authorized Signature: _____	Total Section 4: _____
	Total: _____

Section 1: Entertainment

Date	Location	Business Guests	Business Purpose	Expense Amount
			Total Section 1:	

Section 2: Travel Expenses

Dates of Travel	To City	Airline Expense	Meals	Transportation	Lodging	Other	Trip Total
	Total Section 2:						

Section 3: Business Meetings

Date	Location	Business Guests	Business Purpose	Expense Amount
			Total Section 3:	

Section 4: Misc. Expenses

Date	Item Purchased	Purpose	Cost	Dept. Code	Auth. Signature	Expense Total
					Total Section 4:	