

Workplace Expense Reimbursement Policy Sample

Effective Date: [MM/DD/YYYY]

Applies to: All employees of [Company Name]

1. Purpose

This policy outlines the procedures and guidelines for employees seeking reimbursement for reasonable and necessary expenses incurred while conducting company business.

2. Scope

This policy applies to all employees, contractors, and consultants of [Company Name] who incur expenses on behalf of the company.

3. Eligible Expenses

- Transportation (airfare, mileage, taxi, rideshare)
- Lodging/hotel accommodations
- Business meals and refreshments
- Office supplies
- Client entertainment (with prior approval)
- Other expenses pre-approved by a manager or supervisor

4. Ineligible Expenses

- Personal travel or leisure activities
- Alcoholic beverages (unless part of approved client entertainment)
- Fines and penalties
- Companion travel expenses
- Unapproved upgrades (airline, hotel, etc.)

5. Reimbursement Procedure

1. Complete the Expense Reimbursement Form within 10 business days of incurring the expense.
2. Attach clear, itemized receipts for all expenses over \$25 (or as required).
3. Submit the completed form and receipts to your supervisor for approval.
4. Once approved, submit the documentation to the Accounting department.
5. Reimbursements will be processed within 15 business days of receipt of complete and approved submissions.

6. Mileage Reimbursement

Personal vehicle use will be reimbursed at the current federal mileage rate. Employees must provide the date, starting point, destination, purpose of the trip, and total miles driven.

7. Limits and Approvals

Expenditures over \$500 require prior written approval from a department manager. Non-compliance with this policy may result in denial of reimbursement.

8. Contacts

Questions regarding this policy should be directed to the HR department or your supervisor.

Sample Table: Expense Reimbursement Limits

Expense Type	Maximum Limit	Notes
Hotel	\$150/night	Standard room rate
Meals	\$50/day	Includes gratuity
Mileage	Federal rate	As updated annually

Acknowledgement

By submitting an expense for reimbursement, you acknowledge that you have read, understand, and will comply with this policy.

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