**馬偕醫學院**

**國內出差旅費報告表**

年 月 日

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | | |  | | 職 稱 |  | | 單 位 | |  | | | | 薪 額 |  | |
| 出差事由 | | |  | | | | | | | | | | | | | |
| 出差期間 | | | 中華民國 年 月 日起至 年 月 日止，共計 日。 | | | | | | | | | | | | | |
| 年 | 月 | 日 | 起 訖 地 點 | | 工 作 紀 要 | | 交通費 | | 費 | | 費 | | 費 | | | 合 計 |
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| 合 計 | | | | | | |  | |  | |  | |  | | |  |
| **差旅費總計新台幣 萬 仟 佰 拾 元整。** | | | | | | | | | | | | | | | | |
| 說明：國內出差旅費報支費別：交通費、住宿費及雜費。 | | | | | | | | | | | | | | | | |
| 出 差 人 | | | |  | | | | 會辦單位 | | | |  | | | | |
| 計畫主持人 | | | |  | | | | 會 計 室 | | | |  | | | | |
| 單位主管 | | | |  | | | | 校長或授權主管 | | | |  | | | | |