

Payroll Advance and Reimbursement Submission Sheet

Employee Name

Enter full name

Employee ID

Enter ID

Department

Enter department

Date

Submission Type

Select type

Pay Period

e.g. Jun 16 - Jun 30, 2024

Advance / Reimbursement Details

Date	Description	Category	Amount	Receipt Attached
<div></div>	<div>e.g. Taxi fare to client site</div>	<div>Select</div>	<div>0.00</div>	<div>Select</div>
<div></div>	<div></div>	<div>Select</div>	<div></div>	<div>Select</div>
<div></div>	<div></div>	<div>Select</div>	<div></div>	<div>Select</div>
			Total:	

Remarks / Justification

Add any relevant explanation or justification here

Employee Signature

Type name to sign

Approver Name

Approval Date

Important Notes:

- All claims must be supported by valid receipts where applicable.
- Provide clear descriptions and justification for each expense or cash advance request.
- Submission and approval are required prior to payroll processing deadlines.
- Misuse or falsification of information may result in disciplinary action.
- Contact HR or Finance for guidance regarding eligible advance or reimbursement items.