

Client Entertainment Expense Reimbursement Form

Employee Name

Department

Date of Entertainment

Client Name/Company

Purpose of Entertainment

Expense Details

Date	Description	Vendor/Location	Amount (USD)	Receipt Attached
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Yes/No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Yes/No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Yes/No

Total Amount (USD)

Additional Remarks

Employee Signature

Date

Important Notes:

- Attach valid receipts for all expenses claimed.
- Provide detailed purpose and client details for verification.
- Claims must comply with the company's expense reimbursement policy.
- Submit the completed form to the Finance/HR department for approval.

