

# Cash Expense Receipt

Receipt No.:

Date:

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Time:

Paid To:

Department / Project:

## Expense Details

#	Description of Expense	Account Code	Amount (â,¹)
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
<b>Total</b>			_____

Amount (in words):

Purpose of Expense:

Submitted By:

Checked By:

Approved By:

Signature of Receiver

Signature of Issuer

Authorization Signature

## Important Notes

- All fields must be completed for auditing purposes.
- Attach supporting bills and documents for each expense entry.
- Obtain required authorizations before cash disbursement.
- Ensure expenses comply with organizational and tax policies.
- Duplicate or incomplete receipts may be rejected during audits.