

Employee Expense Reimbursement Form

Employee Information

Full Name

Employee ID

Department

Email Address

Expense Details

Date	Expense Type	Description	Amount
<input type="text"/>	<div>Travel</div>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<div>Travel</div>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<div>Travel</div>	<input type="text"/>	<input type="text"/>
Total			<input type="text"/>

Attachment(s) (Receipts, Invoices, etc.)

List file names or references

Employee Declaration

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I certify that the above expenses are accurate and were incurred for business purposes.

Approvals

Employee Signature

Date

Manager/Supervisor Approval

Date

Important Notes

- Attach all original receipts or valid proof of expenses for each claim.
- Ensure expenses comply with company policies before submitting.
- Incomplete forms or missing documentation may result in reimbursement delay.
- This form must be signed by both the employee and approving manager.
- Keep a copy of this form and all submissions for your records.