Expense Report

Employee Name

Enter employee name

Employee ID

Enter ID

Department

Department

Report Period

e.g. May 2024

Submission Date

Date	Description	Category	Payment Method	Amount (USD)	Receipt Attached
	Describe expe	Category	e.g. Card/Cash		Yes/No
	Describe expe	Category	e.g. Card/Cash		Yes/No
	Describe expe	Category	e.g. Card/Cash		Yes/No
			Total:		

_____

Employee Signature

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Manager Approval Signature

Important Notes:

- Ensure all receipts are attached for each expense item as supporting documents.
- Fill in all fields accurately; incomplete reports may cause processing delays.
- This format can be edited further based on organization policies or specific requirements.
- Obtain all necessary approvals and retain a copy for your records.
- Submitted expenses must comply with company reimbursement policies.