

Employee Accommodation Expense Statement

Employee Name:	John Doe	Employee ID:	EMP12345
Department:	Finance	Designation:	Accountant
Reporting Manager:	Jane Smith	Period of Stay:	2024-05-01 to 2024-05-31
Location of Stay:	City Inn, Downtown	Date Submitted:	2024-06-10

Expense Details

Date	Description	Invoice Number	Amount (USD)
2024-05-02	Hotel Accommodation (2 nights)	INV-2356	220.00
2024-05-10	Hotel Accommodation (3 nights)	INV-2488	330.00
2024-05-20	Extended Stay (5 nights)	INV-2567	550.00
Total			1,100.00

Employee Signature & Date

Manager Approval & Date

Important Notes:

- All expenses must be supported by original invoices or receipts.
- Only accommodation expenses incurred for official purposes are reimbursable.
- Statement must be submitted within 10 days of the period end date.
- Falsification or misrepresentation may result in disciplinary action.
- Contact the HR department for queries about reimbursable accommodation costs.