

Per Diem Summary Report – Field Staff

Employee Name: _____

Employee ID: _____

Position: _____

Department: _____

Reporting Period: ____ / ____ / ____ to ____ / ____ / ____

Supervisor: _____

Per Diem Details

Date	Location	Purpose of Visit	Per Diem Rate	No. of Days	Total Per Diem	Remarks
____ / ____ / ____	_____	_____	_____	_____	_____	_____
____ / ____ / ____	_____	_____	_____	_____	_____	_____

Total Per Diem Claimed: _____

Employee Signature: _____

Date: ____ / ____ / ____

Supervisor Approval: _____

Date: ____ / ____ / ____

Important Notes

- All claimed per diem must comply with company policies and rates.
- Attach supporting documents for all claimed days (if required).
- Incomplete or inaccurate reports may delay processing or lead to rejection.
- Ensure supervisor approval before submission to the finance department.
- This report is for field staff who are required to travel for official duties.