

Cash Expense Receipt

(Employee Use)

Receipt No.:

Date:

Department:

Employee Name:

Employee ID:

Purpose/Description:

Expense Details

Date	Description	Amount
Total		

Employee Signature

Approver Signature

Date

- This receipt must be completed and signed for all cash expense reimbursements.
- Supporting receipts should be attached where possible.
- Receipts without proper authorization will not be processed.
- Ensure all information is filled out clearly and accurately.
- Submit this document to the accounting/finance department after approval.