

Group Food Bill Reimbursement Sheet

Date of Meal:
2024-06-09

Location/Venue:
ABC Restaurant

Department/Project:
Project Neptune

Purpose of Meal:
Team Meeting & Celebration

Paid By:
Jane Doe

List of Members Present

#	Name	Department	Signature
1	Jane Doe	Development	_____
2	John Smith	Design	_____
3	Alice Green	QA	_____
4	Michael Tan	Development	_____
5	Lisa Wong	Marketing	_____

Expense Details

Date	Description	Amount (USD)
2024-06-09	Group Lunch - Main Course	120.00
2024-06-09	Beverages	40.00
2024-06-09	Desserts	30.00
Total		190.00

Approval & Claim

Claimed By:
Jane Doe

Date:
2024-06-10

Approved By:

Date:

Important Notes

- All original receipts must be attached with this form.
- Ensure all attendee names and signatures are provided and legible.
- The purpose of the meal should be clearly mentioned.
- Reimbursement requests must comply with company policies and limits.
- Approval from the relevant authority is mandatory prior to reimbursement.

