

Undertaking for Employee Reimbursement

Date: _____

To,
The HR/Finance Department
[Company Name]
[Company Address]

Subject: Undertaking for Claiming Reimbursement

I, [Employee Name], Employee ID [Employee ID], working in [Department/Designation], hereby submit my claim for reimbursement amounting to Rs. [Amount] towards [Mention Purpose: e.g., travel, medical, etc.].

I undertake that:

1. The claimed amount is genuine and has been incurred for official/company purposes only.
2. All bills and receipts submitted along with this claim are true and have not been claimed previously.
3. If at any time it is found that my claim is false or has been claimed earlier, I shall be liable to refund the amount, and appropriate disciplinary/legal action may be taken against me.

Kindly process my reimbursement request at the earliest.

(Employee Signature)
Name: [Employee Name]
Date: _____

(Manager/Supervisor Signature)
Name: [Manager Name]
Date: _____

Important Notes:

- Ensure all supporting documents are attached with the undertaking.
- Read the company's reimbursement policy before submitting the claim.
- False declarations may attract disciplinary/legal actions.
- This document serves as a legal declaration for processing reimbursements.