

Project Expense Claim Summary

Claimant Name

Jane Doe

Employee ID

EMP12345

Department

Project Delivery

Date Submitted

2024-06-18

Project Name

Alpha Revamp Initiative

Project Code

PRJ-0198

Claim Period

2024-05-01 to 2024-05-31

Expense Details

Date	Expense Type	Description	Reference	Amount (USD)
2024-05-04	Travel	Taxi to client site	INV-21755	35.00
2024-05-06	Accommodation	Overnight hotel stay	HOTEL-9854	120.00
2024-05-10	Meals	Lunch with project team	RCPT-4441	18.50
2024-05-25	Stationery	Project supplies	RCPT-5552	12.90
				Total 186.40

Summary & Approval

Total Amount Claimed

USD 186.40

Approved By

Samuel Green

Approval Date

2024-06-20

Important Notes

- All receipts must be attached to support claimed expenses.
- Claims should be submitted within the policy-defined period after incurring expenses.
- Ensure expense types and project codes are correct to avoid processing delays.
- Approvals from authorized personnel are required prior to reimbursement.
- Non-compliant or incomplete claims may be rejected.