

# Employee Accommodation Expense Reimbursement Form

## Employee Information

Full Name

Employee ID

Department

Contact Number

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## Accommodation Expense Details

Date	Accommodation Type	Location	Amount (USD)	Description
<input type="text"/>	<input type="button" value="Hotel"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="button" value="Hotel"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="button" value="Hotel"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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Total Amount

Purpose of Accommodation

Attachment(s) / Receipts (List file names or details)

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Employee Signature & Date

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Manager/Supervisor Approval & Date

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Finance/HR Verification & Date

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### Important Notes

- All expense claims must be supported with original receipts or valid proof of payment.
- Accommodation expenses must comply with the company's travel and reimbursement policy.
- Incomplete or incorrect forms may result in delay or rejection of reimbursement.
- This form should be submitted within the stipulated time after incurring the expenses.
- Approval from both your manager and finance/HR is required for processing.