

Employee Accommodation Expense Reimbursement Form

Employee Information

Full Name

Employee ID

Department

Contact Number

Accommodation Expense Details

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

Total Amount

Purpose of Accommodation

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

Employee Signature & Date

Manager/Supervisor Approval & Date

Finance/HR Verification & Date

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.