

Project-based Expense Reimbursement Report

Project Name

Project ID

Report Date

Employee Name

Employee ID

Department

Expense Details

Date	Description	Category	Amount	Receipt Attached
<input type="text"/>	<input type="text"/>	Select <input type="button" value="▼"/>	<input type="text"/>	Select <input type="button" value="▼"/>
<input type="text"/>	<input type="text"/>	Select <input type="button" value="▼"/>	<input type="text"/>	Select <input type="button" value="▼"/>
Total			<input type="text"/>	

Remarks / Notes

Employee Signature

Date

Manager Approval

Date

Note: Please attach scanned receipts as required and ensure all information is accurate before submitting this report.

