

# Expense Reimbursement Record Form

The **expense reimbursement record form** sample provides a clear structure with itemized fields to ensure accurate tracking of expenses. This form simplifies the reimbursement process by detailing each cost incurred, promoting transparency and accountability. Ideal for businesses, it streamlines financial record-keeping and expense verification.

## Employee Information

Employee Name:	<div></div>	Employee ID:	<div></div>
Department:	<div></div>	Date Submitted:	<div>____/____/____</div>
Manager/Supervisor:	<div></div>	Contact Email:	<div></div>

## Itemized Expenses

Date	Description	Expense Category	Amount (USD)	Receipt Attached	Notes
<div>____/____/____</div>		<div>Travel</div>		<div><input type="checkbox"/> Yes</div>	
<div>____/____/____</div>		<div>Travel</div>		<div><input type="checkbox"/> Yes</div>	
<div>____/____/____</div>		<div>Travel</div>		<div><input type="checkbox"/> Yes</div>	

Total Amount Requested:	<div></div>
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## Employee Certification

I certify that the expenses listed above are accurate and were incurred for business purposes.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Manager/Supervisor Approval

Approved By: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Comments: \_\_\_\_\_

\* Please attach all relevant receipts and supporting documents to this form.