

Expense Reimbursement Request Form (Including GST/HST)

Employee Information

Name: _____
Employee ID #: _____
Department: _____
Date Submitted: ____ / ____ / _____

Expense Details

Date	Description	Vendor	Amount (before GST/HST)	GST/HST Amount	Total Amount	Receipt Attached
____ / ____ / ____	e.g. Office Supplies	e.g. ABC Stationery	\$ _____	\$ _____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Summary

Total (before GST/HST): \$ _____
Total GST/HST: \$ _____
Grand Total: \$ _____

Note: Please attach original receipts for all expenses. Ensure the GST/HST is clearly indicated on each receipt. Submit the completed form and receipts to your finance department for processing.

Employee Signature: _____ Date: ____ / ____ / _____

Manager Approval: _____ Date: ____ / ____ / _____