

Expense Claim Record Form: Office Supplies

This **expense claim record form** sample is designed to simplify the reimbursement process for office supplies. It ensures accurate documentation of expenses while maintaining transparency and accountability. Ideal for businesses seeking efficient financial management.

Employee Name: Department:

Date of Claim: Claim Reference No.:

Date of Purchase	Vendor/Supplier	Description of Item	Quantity	Unit Cost	Total Cost	Receipt Attached
<input type="text"/>	<input type="button" value="Yes ▾"/>					
<input type="text"/>	<input type="button" value="Yes ▾"/>					
<input type="text"/>	<input type="button" value="Yes ▾"/>					

Total Amount Claimed:

Reason / Notes:

Explain the purpose or business use of the office supplies.

Employee Signature: Date:

Manager Approval: Date:

[Submit Claim](#)