

Travel Expenses Reimbursement Form

Employee Name:	DHANARAJ R
Employee ID:	GKA0526
Employee Position:	AGM
Division:	Socks

Expense Period

Travel purpose	Buyer Meeting in Madurai
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Total: 2,209.00

Subtotal: ₦ 2,209.00

Advance Payment:

Employee Signature:

Date: 06/12/25

*Don't forget to attach bills/receipts

Approval Signature:

Date:

Approval Name:

ation: GM-MARKETING & MERCHANDISING

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Approved sheet is must and to be submitted along with claim bill

Note:

1. Public Transport : Ticket should be affixed
2. On duty approved sheet is must and to be submitted along with claim bill