

## Expense Claim Form

Company Name

123 town/city/state/country zip

Phone# (555)-555-5555

Email: [abc\(@\)dotols.org](mailto:abc(@)dotols.org)

Employee Name	Adam Smith	Date	23-Sep-15
Employee ID	9870-9876-1234	Expense Details	
Designation	Assistant Manager	Period start from	15-Jul-15
		Period end at	10-Sep-15

Submit To Lauren Jennifer

Manager	Department	Finance
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### Purpose of Expense

Enter complete expense purpose detail here

Date	Description	Category	Expense category	Cost
13-Sep-15	Meeting with Adam	Official	Travelling	\$350.00
14-Sep-15	Lunch	Formal	Food	\$50.00
				\$789.00
			SUBTOTAL	\$1,189.00
			Others	\$50.00
			TOTAL	\$1,239.00

Please write detail of "Others" expense here

Approval Authority Signature

Figure 1. Schematic representation of the experimental design. The subjects were divided into two groups: the control group (CG) and the experimental group (EG). The CG was divided into two subgroups: the control group (CG) and the control group (CG). The EG was divided into two subgroups: the experimental group (EG) and the experimental group (EG). The CG was divided into two subgroups: the control group (CG) and the control group (CG). The EG was divided into two subgroups: the experimental group (EG) and the experimental group (EG).

Employee Signature

**Case**

### Attach Receipts

[www.dotols.org](http://www.dotols.org)