

<b>A</b> pprove	/Reject Expense			
Date of Requ	est: 03/11/2022			
Name:				
Aishwarya	C M			
Designation:				
QA				
Expense Request Details:				
S.No.	Expense Category	Expense Amount(USD)	Reason for Purchase	
1.	Office Supply	3534634	sfdGSDGG	
Comment:  35345#%#\$^#\$^DFG xcBXCBDF<>>?<> EY\$^\$%^\$547457				
MMMMM				
(Signature)				

Name:

Client Test				
Designation:				
VP				
○ Approved				
Comment:				
test				
test				
Authorized Signature				
Date: 2022-11-06				