

Approve/Reject Expense								
Date of Request: 12/11/2022 Name:								
Testing Employee								
Designation:								
test category								
Expense Request Details:								
S.No.	Expense Category	Expense Date	Expense Amount(USD)	Reason for Purchase				
1.	Travel	10/11/2022	100	Testing				
2.	Accomodation	02/11/2022	50	Testing				
Comment:								
test								
test								
(Signature)								

To be Filled by Accounts Department:

Name:	
Client Test	
Designation:	
VP	
Approved ○ Denied	
Comment:	
test	
test	
Authorized Signature	
Date: 17/11/2022	

Approve/Reject Expense								
Date of R	equest: 2022-03-31							
Name:	nutosh Ghosh							
Designation: Developer								
Expense Request Details:								
Number	Type of Product	Cost of Product(USD)	Reason for Purchase					
1.	traveltest	12	Office					
2.	foodguest	13	Office					
Commen	t:							
test								
test (Signature)								
	T	o be Filled by Accounts Department	:					
Name: Client Test								
Designation: VP								
Approved								
O Denie	d							
Reason:	test							
fer								
Aut	thorized Signature							

Date: 2022-03-31