**Declaration form for reimbursement if in the name of Spouse and Parents :**

**I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** hereby declare that the invoice in name of <\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.>  dated  <\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_> submitted by me for internet reimbursement is being used exclusively by me and shall not bereimbursed separately by any of my family members.

In case, it is found that the same invoice has been raised for reimbursement by either me or any of my family member, company has the right to reject my claim or can recover the amount paid along with the necessary action per the policy.

Name of Employee :

Emp id :

Date :

Relation with employee:

**(pls note : this should be duly signed)**