NAME	Super Admin C UserC
DESIGNATION	Head of Dept.
OFFICE CODE	CODE02
DATE	

## Company A MONTHLY EXPENSES BILL

MONTH	11
YEAR	2018
BDT	0
GRADE	Grade3

Date	Institution and Locations	Allowance					Internal Transport			
		HQ	EX Hq	O/S	Hotel Fare	Transport(with Ticket)	Mode	Fare	Total	Remarks
1									0	
2	Friday								0	
3									0	
4									0	
5									0	
6									0	
7									0	
8									0	
9	Friday								0	
10									0	
11									0	
12									0	
13									0	
14									0	
15									0	
16	Friday								0	
17									0	
18									0	
19									0	
20									0	
21									0	
22									0	
23	Friday								0	

24							Inte	nal	0	
25			Allowanc	e			Transport		0	
Date	Institution and Locations	HQ	EX Hq	O/S	Hotel Fare	Transport(with Ticket)	Mode	Fare	Total	Remarks
27									0	
28									0	
29									0	
30	Friday								0	
	Total:							0		
In Words										

Signature	Approved By		