

GOWRIE LTD/ LAXMICO LTD															EMPLOYEE EXPENSE CLAIM									
EMPLOYEE NUMBER:				NAME:					DIVISION/				WEEK/MONTH ENDING:											
									DEPARTMENT:		Finance													
DATE	DESCRIPTION / ITINERARY	CUSTOMER	R E F	CAR MILES	MILE- AGE RATE	FOREIGN EXCHANGE AMOUNT/	EXCHANGE RATE	TRAVEL & SUBSIST	PETROL	ENTER TAINING	PARKING	OTHER	VAT	TOTAL										
			1																					
			2																					
			3																					
			4																					
			5																					
			6																					
			7																					
			9																					
			11																					
			12																					
			13																					
			14																					
			15																					
			16																					
			17																					
			18																					
			19																					
		TOTALS				£																		
COMPANY CAR BUSINESS MILES -		TOTAL B/F				RATE USED :				TOTAL EXPENSES			0.00	0.00	0.00									
		TOTAL C/F																						
EMPLOYEE SIGNATURE				ACCOUNT											DEPT		AMOUNT		ACCOUNT	DEPT	AMOUNT			
				TRAVEL																.				
				PETROL																				
				CLIENT ENTMT																.				
				CAR PARKING																.				
SUPERVISOR SIGNATURE (PRINT NAME BELOW)				OTHERS															.					
															Batch No:									
				VAT																				