# Expense Claim Form

1.Hj Mat Hj Jantan Sdn Bhd
2.Hmj Bizpoint Sdn Bhd
3. Hmj Engineering Sdn Bhd

| | | | |
|---|---|---|---|
| **Empolyee Name** | | **Date** | **:** |
| Employee ID | : | Expense Detail | |
| Designation | : | Period start from | : |
| | | Period end at | : |

| | | | |
|---|---|---|---|
| **Submit to** | **: Ernie Lizawati bt Muhamad** | **Department** | **Finance** |

**Purpose of expense**

| |
|---|
| |

| Date | Description | Category | Expense category | Cost (RM) |
|---|---|---|---|---|
| | | | | |
| | | | **Subtotal** | - |
| | | | **Less cash advance** | |
| | | | **Total** | - |

Employee Signature

Verified by HOD

Nama
Date

Nama
Date

Approved by Finance/Manager

Nama
Date
Note : Attach Receipt