

Monthly Expense Submission Form

Name

Department

Month

Expense Details

Date	Category	Description	Amount	Remarks
YYYY-MM-DD	<input type="button" value="▼"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
YYYY-MM-DD	<input type="button" value="▼"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
YYYY-MM-DD	<input type="button" value="▼"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Total Amount

Additional Notes

Signature

Date Submitted