

# Monthly Employee Expense Report Form

Employee Name

Employee ID

Department

Month

Supervisor

## Expense Details

Date	Description	Category	Amount	Receipt?	Notes
<input type="text"/>	<input type="text"/>	<div>Selec<div></div></div>	<input type="text"/>	<div>Selec<div></div></div>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<div>Selec<div></div></div>	<input type="text"/>	<div>Selec<div></div></div>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<div>Selec<div></div></div>	<input type="text"/>	<div>Selec<div></div></div>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<div>Selec<div></div></div>	<input type="text"/>	<div>Selec<div></div></div>	<input type="text"/>
Total			<input type="text"/>		

Comments / Additional Information

Employee Signature

Date

Supervisor Approval

Date