

MONTHLY EXPENSE FORM

(Due to Supervisor/Team Leader on the 1st Tuesday of Every Month)
(Due to Accounting on the 2nd Tuesday of Every Month)

| Employee: | Month: | | | |
|-----------------------|------------------------|---------|-----------------|--------|
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| Date | RETAILER & DESCRIPTION | | Total Amount | Client |
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| | | TOTAL: | \$ - | |
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| Employee Signa | ature: | Date: | | |
| р.о,сс 515110 | | . Date. | | |
| Supervisor Signature: | | Date: | | |