



**KANSAS LABORATORIES PVT. LTD.**  
**EXPENSE REPORT**

PERIOD FROM ..... NAME.....

To..... No..... DATE.....

Day	Date	Station Worked	Mode of Travel	K.M.	Fare		Allowances		Other Expenses		Daily Total	
					Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.

<b>Details of other Expense (Utilise reverse, if necessary)</b>  <b>Vouchers/Receipts to be submitted in support of expenses/Tel. Charges</b>	<b>Balance as per last expense Report</b>			
	<b>AMOUNT RECEIVED SINCE A/C DEPTS REF.....</b>			
	<b>TOTAL</b>			
	<b>Less : Amount of this Expense Report</b>			
	<b>Balance Due to      <u>company</u>                                   Employee</b>			
	<b>FOR OFFICE USE ONLY</b>			
	<b>A/C. CODE</b>			
<b>I hereby certify that all the expenses incurred as above were on behalf of the company.</b>  <b>Signature of the Employee.....</b>	<b>VERIFIED BY :</b>	<b>PAYMENT APPROVED BY :</b>		
	Sales Dept.....	Sales Dept.....		
	Accounts Dept.....	Accounts Dept.....		