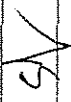


Weekly - Petty cash /expense card statement.

Name		K Suneel Kumar		Statement date		15-02-2025 Card No.4629 5254 2716 5724	
Prepared by		K Suneel Kumar		Sign			
From period		07-02-2025		To period		14-02-2025	

Sl No	Debit to company	Debit to project	Description of expense	Amount	Bill enclosed	GST bill
1.	AMS 3663	AMS 3663	screen guard for TAB	450	☐ Y ☐ N	☐ Y ☐ N
2.					☐ Y ☐ N	☐ Y ☐ N
3.					☐ Y ☐ N	☐ Y ☐ N
4.					☐ Y ☐ N	☐ Y ☐ N
5.					☐ Y ☐ N	☐ Y ☐ N
6.					☐ Y ☐ N	☐ Y ☐ N
7.					☐ Y ☐ N	☐ Y ☐ N
8.					☐ Y ☐ N	☐ Y ☐ N
9.					☐ Y ☐ N	☐ Y ☐ N
10.					☐ Y ☐ N	☐ Y ☐ N
11.	Total			450		

Amount to be credited by				☐ Transfer to expense card, ☐ Cash reimbursement, ☐ Transfer to personal a/c. ☐ Other:			
Approved by:		Div. Manager		Accountant		Accounts Manager	
Sign:							
Date:							

Notes: 1. Scanned copy of this statement to be submitted before every Friday 2pm. 2. Original vouchers to be attached to this statement and send to respective accountant by Monday. 3. Accountants to make payment on receipt of scanned statement on Saturday. 4. If original statement with vouchers of last week is not received withhold further payment and salary. 5. Employee must maintain photocopy of all bills/vouchers for 3 months. 6. Division manager and accounts manager approval required for expenses of over 2,000/- per week. MDs approval is required for expenses of over 10,000/- per week.

DEBIT VOUCHER

AMTZ ~~2000~~ Med Poly square 3663 Put 4A

Voucher No. _____

A/c. _____ Date : 12/2/25

Paid to <u>Sai Mobily .1</u>				Rs.	Ps.
towards <u>Towards Tab Screen guard</u>				450	-
Rupees <u>Four hundred fifty only</u>					
Paid by <u>Cheque</u>	Cheque No.	Dated	Drawn on Bank	450	-
Cash					

Prepared by [Signature]

Approved by

Receiver's Signature