Weekly - Petty cash /expense card statement.

| | 7 | | ount Bill GST bill | enclosed Y N Y N | Y N Y N | N Y N Y | Y N Y N | Y N Y | Y N Y N | Y N Y N | Y N Y N | Y N Y N | 0> | Transfer to personal a/c, | MD | | |
|-------------------------------------|-------------|-------------|------------------------|-------------------------------|----------------------------|------------------------|---------|-------|---------|---------|---------|----------|-----------------------|--------------------------------|------------------|-----------------------|-----------|
| ent. | 2 | 1 | Amount | whomat 1700 | | 7ceting 350 | 9 | | | | | | 2540 | Cash reimbursement, Transfer | Accounts Manager | | |
| Statement date Statement date 1 | - | To period | Description of expense | Brev Brochers Distable den at | Yerome Valley Bussess 6 NA | The Sance Save Meeting | | | | | | | | Transfer to expense card, | Accountant | | SMUTTO OI |
| Children mouse | C HWAY | | Debit to project | MOD. Real H yenone Vallegue | | | | | | | | | | Transfer to Happy card, Other: | Div. Manager 0 | The State of the same | OCA . |
| Name 4, | Prepared by | From period | Sl Debit to company No | 1. Mos Ranha | | 11 | 5. | 6. | 7. | 8. | 9. | 10 Total | Amount to Lead 11. 11 | Autount to be credited by | Approved by: | Sign: | Date: |

Notes: I. Scanned copy of this statement to be submitted before every Friday 2ppt 2 of Figural Youchers to be attached to this statement and send to respective accountant by Monday. 3. Accountants to make payment on receipted of scanned statement on Safurday. 4. If original statement with youther of last work 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 exposes of over 10,000/- per week

| | DEBIT VOU | CHER | | | | | |
|-----------------------------|---|--------------------|---------------------|--|--|--|--|
| Company/Firm | MOD; Real | if Genome V | avej u | | | | |
| Project | Bysu | l | | | | | |
| Voucher No. | | | | | | | |
| Account head | | | | | | | |
| Paid to | 430 | | | | | | |
| Towards/description of work | Bry Brahers Distribution Bry Brahers Distribution at Genome Vall | | | | | | |
| Location of work | | | | | | | |
| Amount in Rs. | 1700 | | | | | | |
| Amount in words | One Hyportans Seven Handred any | | | | | | |
| Mode of payment | | JC V3 NO THE WORLD | 7 | | | | |
| | Cheque/trf No. | Date 21/2/25 | Bank | | | | |
| Prepared by | Approved by | Receivers Name | Receivers Signature | | | | |
| Yours. | APPROVEDEY | X | | | | | |
| - | APP E PRASAN | ROTIONS ! | | | | | |





Near Shamirpet, Hyderabad.



| \ | DEBIT VOU | CHER | | | | | | |
|-----------------------------|----------------|--------------------------------|---------------------|--|--|--|--|--|
| Company/Firm | MOD! Bear | In l'esometer | IN WP | | | | | |
| Project | Ph. | In Genome Vel | | | | | | |
| Voucher No. | | | | | | | | |
| Account head | | | | | | | | |
| Paid to | Jea fance | Tea fance | | | | | | |
| Towards/description of work | Tea Lanue | Tea Janue faie yeating 16/2/25 | | | | | | |
| Location of work | | 0 | | | | | | |
| Amount in Rs. | 350 | | | | | | | |
| Amount in words | tarce Hund | tyre Hundred Fifty oney | | | | | | |
| Mode of payment | | | , | | | | | |
| | Cheque/trf No. | Date 2/2/20 | Bank | | | | | |
| | | | | | | | | |
| Prepared by | Approved by | Receivers Name | Receivers Signature | | | | | |
| YNM. | Jun ED E | | | | | | | |

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