

Weekly - Petty cash /expense card statement.

Name	K Suneel Kumar		Statement date	21-11-2025 Card No.4629 5254 2716 5724			
Prepared by	K Suneel Kumar		Sign				
From period	21-11-2025		To period	27-11-2025			
Sl No	Debit to company	Debit to project	Description of expense			Amount	Bill enclosed
1.	MHTR	MHTR	Printer repairing charges			1800	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N
2.							<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N
3.							<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N
4.							<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N
5.							<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N
6.							<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N
7.							<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N
8.							<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N
9.							<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N
10.							<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N
11.	Total					1800	
Amount to be credited by	<input type="checkbox"/> Transfer to expense card, <input type="checkbox"/> Cash reimbursement, <input type="checkbox"/> Transfer to personal a/c. <input type="checkbox"/> Other:						
Approved by:	Div. Manager	Accountant	Accounts Manager		MD		
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 receipted 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

## INVOICE

**SC** SILICON COMPUTERS

#2, Block 19, Baglingampally,  
Hyderabad - 44. Mobile: 901 082 0929

Date:

23/11/25

No.:

658

M/s.

modi housing trading

Sl.No.	Description	Qty.	Rate	Total ₹
1.	Epson m200 Printer repairing charge	1		1800 ₹
	TOTAL			1800 ₹

Rupees in words: \_\_\_\_\_

*C. J.*  
for SILICON COMPUTERS