

Weekly - Petty cash /expense card statement.

Name	K Suneel Kumar		Statement date	09-01-2026 Card No.4629 5254 2716 5724		
Prepared by	K Suneel Kumar		Sign			
From period	02-01-2026		To period	08-01-2026		
Sl No	Debit to company	Debit to project	Description of expense	Amount	Bill enclosed	GST bill
1.	MHTR	MHTR	Adapter purchased	400	<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			400		
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 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

modi Housing Tradi

Voucher No. _____

A/c. _____

Date :

8/1/26

Paid to Sai Constructions				Rs.	Ps.
towards Dtpo adapte for tab purchased for				400	1
Briker					
Rupees Four Hundred only					
Paid by	Cheque	Cheque No.	Dated	Drawn on Bank	
Cash					400 ✓

Prepared by

Approved by

Receiver's Signature