VISA & PASSPORT EXPENSE CLAIM FORM

Business Travel Reimbursement

Employee Information

Employee Name

Employee ID

Department / Cost Center

Manager / Approver Name

Submission Date

Purpose of Travel

Expense Details

Date of Expense	Document Type (Visa/Passport/Photos/Courier)	Destination Country	Receipt / Ref No.	Currency	Original Amount	Claimed Amount (Local)
				Total Reimbursement Claim:		

Signatures & Approvals

Employee Signature

Date: _____

Authorized Approver Signature

Date: _____

Submission Notes:

- Original receipts/invoices must be attached for all items claimed.
- For visa applications, please attach a copy of the visa or confirmation page if applicable.
- All claims must be submitted within the timeline specified by company policy.