VISA & PASSPORT EXPENSE CLAIM

FORM REF NO. _____

EMPLOYEE NAME _____

DEPARTMENT / COST CENTER _____

JOB TITLE _____

SUBMISSION DATE _____

MANAGER / APPROVER NAME _____

PURPOSE OF TRAVEL _____

Date	Applicant Name	Country	Type (Visa/Passport/Permit)	Application Fee	Courier & Photos	Translation & Legalization	Other Fees	Receipt Attached
								☐
								☐
								☐
								☐
								☐

Subtotal: Application Fees	
Subtotal: Courier & Photos	
Subtotal: Translation & Legalization	
Subtotal: Other Fees	
Grand Total	

EMPLOYEE SIGNATURE & DATE

MANAGER APPROVAL & DATE

FINANCE/HR VERIFICATION & DATE