AUTO FINANCE INTEREST REIMBURSEMENT

EMPLOYEE INFORMATION

Employee Name		Employee ID	
Department		Submission Date	
Job Title		Manager/Supervisor	

VEHICLE & LOAN DETAILS

Vehicle Make & Model		Lending Institution	
Vehicle VIN		Loan Account Number	
Loan Term (Months)		Interest Rate (%)	

REIMBURSEMENT CLAIM DETAILS

PAYMENT DATE	BILLING PERIOD	TOTAL PAYMENT ($)	PRINCIPAL PAID ($)	INTEREST PAID ($)
			Total Interest Claimed:	

Required Documentation:

1. Please attach the relevant official monthly bank/loan statements highlighting the interest paid for each period claimed.
2. Proof of payment (bank clearance or receipt) must be enclosed for each billing cycle listed above.

Employee Signature Date

Authorized Approver Signature Date