

STAFF OFFICE SUPPLY REIMBURSEMENT

Payroll Processing Template

EMPLOYEE INFORMATION

EMPLOYEE NAME _____

EMPLOYEE ID _____

DEPARTMENT _____

JOB TITLE _____

SUBMISSION DATE _____

EXPENSE DETAILS

DATE	MERCHANT / VENDOR	DESCRIPTION OF ITEMS PURCHASED	ACCOUNT CODE	AMOUNT

SUBTOTAL	
TAX (IF APPLICABLE)	
TOTAL REIMBURSEMENT	

AUTHORIZATION & APPROVALS

EMPLOYEE SIGNATURE

DATE _____

SUPERVISOR SIGNATURE

DATE _____

PAYROLL DEPARTMENT APPROVAL

DATE _____

Submission Guidelines:

- Please attach original physical or digital receipts for all items listed above.
- Ensure proper general ledger/account codes are noted for departmental tracking.
- Approved forms must be submitted to the Payroll Department by the designated monthly processing cutoff date.