

GROUP MEAL REIMBURSEMENT FORM

Expense Template for Team Building Event Meals

CLAIMANT INFORMATION

Employee Name

Department / Team

Employee ID

Email Address

EVENT & MEAL DETAILS

Event Name / Purpose

Date of Event

Restaurant / Venue Name

Payment Method Used

ATTENDEES LIST

#	Attendee Name	Department / Company
1		
2		
3		
4		
5		
6		
7		

#	Attendee Name	Department / Company
8	<input type="text"/>	<input type="text"/>

EXPENSE BREAKDOWN

Subtotal Amount

Tax Amount

Gratuuity / Tip

Total Amount Requested

CLAIMANT SIGNATURE

Date:

APPROVER SIGNATURE

Date: