

Marketing or TADA Expenses Statement

Form No.:

Pay Period From:

To:

Name:

Designation:

Department:

| Expenses History | | | | | | | | |
|------------------|------|-------------|-------|-----------|------|-------|-------|-------|
| S.N. | Date | Description | Hotel | Transport | Fuel | Meals | Misc. | Total |
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Submitted By

Verified By

Department Head

Approved By
Kushal Kathayat
CEO