**Reimbursement of Expenses Other Than Travel Checklist**

Payee:

Amount:

Particulars:

Supporting Documents: Two (2) copies collated

*(Put N/A if not applicable)*

* Letter of Request to Regional Director
* Summary of Expenses
* Memorandum
* Approved Budget
* Official Receipt
* Justification (if applicable)
* Inspection and Acceptance Report for goods purchased
* Requisition Slip
* Inventory Custodian Slip for Semi-Expendable Items
* Canvass/Quotation from at least 3 suppliers for purchases above P1000.00

Canvass/Quotations

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Certified Correct Meal Attendance (For Meal Expenses)
* Certified Correct List of Recipients (For Goods/Items Received)
* Other documents that are deemed necessary in the transaction
* QAME Result per Concluded Activities / Trainings / Seminars (if applicable)
* SARO (if applicable)

I hereby certify that above documents are complete and arranged as per checklist.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature over Printed Name / Date

Email Address:

Contact Number/s: