Monthly Team Lunch Expenses Reconciliation Form

Team N	ame				
Month					
Coordin	ator				
Lunch Expenses Details					
Date	Venue/Provider	Number of Participants	Total Amount	Paid By	Notes
Total Ex	pense				
	P				
Approve	ed Budget				
Varianc	е				
Remarks / Justification (if any)					
Submitte	ed By				
Date					