

Employee Advance Repayment Acknowledgement

Employee Details

Employee Name: _____

Employee ID: _____

Department: _____

Position: _____

Advance Details

Advance Amount: _____

Date Advance Issued: _____

Repayment Amount: _____

Date of Repayment: _____

I acknowledge that I have received the above-stated advance and have repaid the specified amount as indicated. I confirm that the repayment has been made in full, and there are no outstanding amounts related to this advance.

By signing below, I confirm and acknowledge the accuracy of the above details.

Employee Signature

Date

Authorized Representative