



# EMPLOYEE EXPENSE CLAIM VOUCHER



ECV No	: DRAFTCV-20230409-0016	ECV Date	: 09-04-2023
Department	: SERVICE DIRECT	ECV Status	: DRAFT
Employee SN	: 10001905	Division	: SOUTHERN KAL
Employee Name	: DIMAS CAHYA SAPUTRA	Branch	: PANGKALAN BUN
Employee Email	: DIMAS.CAHYA@TRAKINDO.CO.ID	Cost Center	: 10H3660HA
		Claim Number	: 1

## Cash Detail

Refer to TCAR No : TC-20221007-0063  
 IO No :  
 Credit Card Settlement : NO  
 TCAR Period : 09-10-2022 - 19-11-2022

## Business Travel

Date	Expense Type	Description	TCAR Ref	Cost Center	WO / IO No.	Currency	Actual Expense
2022-10-23	Training Domestic Travel - Airline Ticket	Ticket				IDR	1,000,000.00

## Non-Travel

Date	Expense Type	Description	TCAR Ref	Cost Center	WO / IO No.	LoB	Currency	Actual Expense
------	--------------	-------------	----------	-------------	-------------	-----	----------	----------------

## VER

Expense Type	Currency	Periode	Actual Expense
--------------	----------	---------	----------------

Status	Currency	Cash Requested	Actual Expense	Total
Claim	IDR	1,000,000.00	1,000,000.00	0.00
Claim	USD	0.00	0.00	0.00

## Approval Matrix

SN	Employee Name	Roles	Email	Status
00004111	YOGO SUTIRTO	SUPERIOR	yogo.sutirto@trakindo.co.id	WAITING FOR APPROVAL
00004955	RULYANA MAULUDY RAHMAN	SUPERIOR	rulyana.rahman@trakindo.co.id	WAITING FOR APPROVAL
-	[VERIFICATION SECTION]	VERIFICATION SECTION	-	WAITING FOR APPROVAL

## File Attachments

Created Date	Created Name	Name
4/9/2023 7:14:37 PM	DIMAS CAHYA SAPUTRA	ecv.pdf

I hereby declare that all the information above is true and correct, supported by adequate evidence as required by the Company policies in filling in a claim. I understand that filing a false claim will result in rejection from the approver and any other disciplinary actions based on Company policies.

---

*This is a system generated document. Should there be any difference of the information and/or the amount printed on this statement and in the system, the correct information is as stated in the system.*