



PEGASUS AUTOMATION SDN BHD (778197-P)

ALLOWANCE CLAIM SUBMISSION FORM

Employee Name: _____

Date: _____

Department: _____

Month: JAN / FEB / MAR / APR / MAY / JUN / JUL / AUG / SEPT / OCT / NOV / DEC

Year: 2015 / 2016 / 2017 / 2018

No.	PETROL (By Receipt - Co. Vehicle)				MILEAGE/ KM - Own Vehicle						TOLL				OUTSTATION MEAL ALLOWANCE					
	Date	Time	Venue	Price (RM)	Date	Plate Num.	From	To	Mileage (KM)	Price (RM)	Date	In	Out	Price (RM)	Date	Site	In	Out	Price (RM)	
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31																				
TOTAL (RM)																				

Applicant's Use	For Office Use
Applicant's Signature:	Verified By (HOD): Approved by (Management):