

Update Expense Report: Cash and Other Expenses - Windows Internet Explorer

http://ebs-prd.hologic.com/OA_HTML/OA.jsp?page=/oracle/apps/ap/oi/entry/header/webui/GeneralInformationPG&OASF=OIE_EXPENSE_REPORT_SEARCH&st

ORACLE Expense Reports

Expenses Home | Expense Reports | Credit Card Transactions | Access Authorizations | Projects and Tasks | Payments Search

General Information | **Cash and Other Expenses** | Expense Allocations | Review

Update Expense Report: Cash and Other Expenses

Save Cancel Back Step 2 of 4 Next

Receipt-Based Expenses [440.00] Mileage Expenses [0.00]

Receipt-Based Expenses

TIP Enter all business expenses. Enter one expense per line. Click Details to enter information specific to this expense. If your receipt includes more than one itemize.
 TIP Date Example: 23-JAN-2013.

Select Expense Lines: Duplicate Remove Show Receipt Currency

Select All Select None

Select	Line	Date	Receipt Amount	Expense Type	Justification	Reimbursable Amount (USD)	Details
<input type="checkbox"/>	1	22-Jan-2013	120.00	MEALS - HEALTHCARE PROVIDERS - INCIDENTALS		120.00	
<input type="checkbox"/>	2	22-Jan-2013	320.00	MEALS - CLIENT		320.00	
<input type="checkbox"/>	3						
<input type="checkbox"/>	4						
<input type="checkbox"/>	5						
<input type="checkbox"/>	6						
<input type="checkbox"/>	7						
<input type="checkbox"/>	8						
<input type="checkbox"/>	9						
<input type="checkbox"/>	10						
						Total	440.00

Add More Lines Update

Select Expense Lines: Duplicate Remove Show Receipt Currency

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MEALS-HEALTHCARE PROVIDERS-
INCIDENTALS and MEALS-CLIENT
require "DETAILS" per line

Select the
"DETAILS" icon to
enter HCP/CLIENT
information (next
screen shot)

Cash and Other Expenses: Details for Line 1

* Indicates required field

Itemize Duplicate New Remove Continue Return

* Expense Type: MEALS -HEALTHCARE PROVIDERS -INCIDENTALS
* Start Date: 22-Jan-2013
* Receipt Amount: 120.00
* Receipt Currency: USD - US Dollar
Exchange Rate: 1
Reimbursable Amount: 120.00 USD

* Justification: Frederick Jones - MA License #123456
Katherine Smith - NY License #34444
Selenia product
Expense Location: Worcester, MA
Merchant Name: Outback Steakhouse
 Original Receipt Missing
Attachments: None Add...

List HCP(s) from below, 2-letter state abbreviation(s), license number(s) and product(s) discussed

Location and Merchant Name

Attendee and Recipient Details

Number of Attendees or Recipients: 2

Employee Information

Select Lines: Remove

Select All Select None

Select *Employee Name

Reidy, Sheryl M

Add Another Row

Non-Employee Information

Select Lines: Remove

Select All Select None

Select *Attendee or Recipient Name

Frederick Jones - MD

Katherine Smith - MD

Add Another Row

Attendee or Recipient Title

Doctor - MA

Doctor - NY

Employer

UMASS Hospital

Tufts Hospital

Healthcare Provider(s)/Client(s) full name, title and state of licensure

Healthcare Provider(s)/Client(s) affiliation or employer

Itemize Duplicate New Remove Continue Return