

Immigration Expense Reimbursement User Guide

Navigation for Immigration Expense Reimbursement Request in ERP

N :-> ERP Login > QF Employee Self Service> Applications > Immigration Expense Reimbursement

Immigration Expense Reimbursement: Special Information

Employee Name
Organization Email Address

Employee Number
Business Group

Immigration Exp Reimbursement

Select	Expense Type	Employee Name	Dependent Name	Receipt Date	Fee Amount	Penalty Exists	Penalty Reason	Penalty Amount if Any	Total Payable Amount	Please read and agree to non-duplication receipt disclaimer	Comments	Status
No results found.												

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Immigration Exp Reimbursement

Employee Name	<input type="text"/>	Employee Number	<input type="text"/>	<input type="button" value="Cancel"/>	<input type="button" value="Apply"/>
Organization Email Address	<input type="text"/>	Business Group	<input type="text"/>		
* Expense Type	<input type="text"/>				
* Employee Name	<input type="text"/>				
Dependent Name	<input type="text"/>				
* Receipt Date	<input type="text"/>				
* Fee Amount	<input type="text"/>				
* Penalty Exists	<input type="text"/>				
Penalty Reason	<input type="text"/>				
Penalty Amount if Any	<input type="text"/>				
* Please read and agree to non-duplication receipt disclaimer	<input type="text"/>				
* Comments	<input type="text"/>				



Immigration Expense Reimbursement: Special Information

[Cancel](#)
[Save For Later](#)
[Back](#)
[Next](#)

Employee Name
 Organization Email Address

Employee Number
 Business Group

Immigration Exp Reimbursement

Select Object: [Update](#) | [Add](#)  

Select	Expense Type	Employee Name	Dependent Name	Receipt Date	Fee Amount	Penalty Exists	Penalty Reason	Penalty Amount if Any	Total Payable Amount	Please read and agree to non-duplication receipt disclaimer	Comments	Status
<input checked="" type="radio"/>						No			500	I agree	Sponsorship Transfer Fees for Child.	New

[Cancel](#)
[Save For Later](#)
[Back](#)
[Next](#)

Immigration Expense Reimbursement: Review

[Cancel](#) |
 [Printable Page](#) |
 [Save For Later](#) |
 [Back](#) |
 [Submit](#)

Employee Name Employee Number
 Email Address

Review your changes and, if needed, attach supporting documents.

 Indicates Changed Items.

Special Information Types

Immigration Exp Reimbursement

Proposed	
Expense Type	Sponsorship Transfer for Dependents
Employee Name	
Dependent Name	
Receipt Date	12-Feb-2019
Fee Amount	500
Penalty Exists	No
Total Payable Amount	500
Please read and agree to non-duplication receipt disclaimer agree	
Comments	Sponsorship Transfer Fees for Child.

Additional Information

Attachments

To help approvers understand the request, you can attach supporting documents, images, or links to this action.

None [Add](#)

- Mandatory Attachments:**
- POS receipt (for MOI over-the-counter transactions)
 - MOI Sponsorship Transfer Application Receipt/Reference Slip
 - Credit card billing statement (if receipt is lost)
 - QID for dependents updated with employee as new sponsor, both front and back sides

Approvers

Add Attachment Cancel Add Another Apply

Add Desktop File/ Text/ URL

Attachment Summary Information

Title

Description

Category **Miscellaneous**

Define Attachment

- Type
- File
 - URL
 - Short Text

 - Long Text

Choose File 44395.jpg