

No claim certificate for an employee's benefits or reimbursements

Subject: No Claim Certificate

Dear [Employee Name],

This is to certify that no claims for reimbursement, leave, or benefits have been made by you during the period from [Start Date] to [End Date] at [Company Name].

This certificate is issued upon your request and is valid for official use.

Regards,

[HR Manager Name]

[Company Name]

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