



SAMPLE CLUB EXPENSE REIMBURSEMENT

You must attach:

Receipts: the original receipts must be attached with the supplier's ABN on them.

Expense reimbursement must be submitted within one month of transaction taking place. Reimbursements will not be processed outside this timeframe.

CLUB NAME:	DATE:	
REASON FOR REIMBURSEMENT:	AMOUNT:	
TREASURER NAME:	TREASURER SIGNATURE:	
CLUB EXEC NAME:	CLUB EXEC SIGNATURE:	
Detaile of oversee		
Details of expenses		Amount & inc CCT
Expense type (eg stationery, canteen purchase, equipment)		Amount \$ inc GST
Bank Details		
Please tick here if your bank details have not changed 🗌		
Name of Claimant:		
	Account Name:	
BSB:	Account Number:	
Person Responsible		
Name of Person Submitting Form:		
Date Submitted:		
Contact Number:		
Email Address:		
Email Addition		



